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ANALYSIS TERMINABLE AND INTERMINABLE

BY

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I

Experience has taught us that psycho-analytic therapy—the liberation of a human being from his neurotic symptoms, inhibitions and abnormalities of character—is a lengthy business. Hence, from the very beginning, attempts have been made to shorten the course of analysis. Such endeavours required no justification: they could claim to be prompted by the strongest considerations alike of reason and expediency. But it may be that there lurked in them some trace of the impatient contempt with which the medical profession of an earlier day regarded the neuroses, seeing in them the unnecessary results of invisible lesions. If you were obliged to deal with them, you simply aimed at getting rid of them with the utmost despatch. Basing his procedure on the theory formulated in *Das Trauma der Geburt* (1924) Otto Rank made a particularly determined attempt to shorten analysis. He assumed that the cardinal source of neurosis was the experience of birth, on the ground of the possibility that the infant's 'primal fixation' to the mother might not be surmounted but persist in the form of 'primal repression'. His hope was that, if this primal trauma were overcome by analysis, the whole neurosis would clear up, so that this one small piece of analytic work, for which a few months should suffice, would do away with the necessity for all the rest. Rank's argument was certainly bold and ingenious but it did not stand the test of critical examination. Moreover, it was a premature attempt, conceived under the stress of the contrast between the post-War misery of Europe and the 'prosperity' of America, and designed to accelerate the tempo of analytic therapy to suit the rush of American life. We have heard little of the clinical results of Rank's plan. Prob-

ably it has not accomplished more than would be done if the men of a fire-brigade, summoned to deal with a fire from an upset oil-lamp, merely removed the lamp from the room in which the conflagration had broken out. Much less time would certainly be spent in so doing than in extinguishing the whole fire. The theory and practice of Rank's experiment are now things of the past—as is American 'prosperity'.

Before the War, I myself had already tried another way of speeding up analysis. I had undertaken to treat a young Russian, a rich man spoilt by riches, who had come to Vienna in a state of complete helplessness, accompanied by physician and attendant.¹ It was possible in the course of several years to restore to him a considerable measure of independence, and to awaken his interest in life, while his relations to the principal people in his life were adjusted. But then we came to a full stop. We made no progress in clearing up his childhood's neurosis, which was the basis of his later illness, and it was obvious that the patient found his present situation quite comfortable and did not intend to take any step which would bring him nearer to the end of his treatment. It was a case of the patient himself obstructing the cure: the analysis was in danger of failing as a result of its—partial—success. In this predicament I resorted to the heroic remedy of fixing a date for the conclusion of the analysis. At the beginning of a period of treatment I told the patient that the coming year was to be the last of his analysis, no matter what progress he made or failed to make in the time still left to him. At first he did not believe me, but, once he was convinced that I was in dead earnest, the change which I had hoped for began to take place. His resistances crumbled away, and in the last months of treatment he was able to produce all the memories and to discover the connecting links which were necessary for the understanding of his early neurosis and his recovery from the illness from which he was then suffering. When he took leave of me at mid-summer, 1914, unsuspecting, as we all were, of what was so shortly to happen, I believed that his cure was complete and permanent.

In a postscript to this patient's case-history (1923) I have already reported that I was mistaken. When, towards the end of the War, he returned to Vienna, a refugee and destitute, I had to help him to

¹ Cf. the paper, published with the patient's consent, 'The History of an Infantile Neurosis' (1918). It contains no detailed account of the young man's subsequent illness, which is touched on only when its connection with his infantile neurosis requires it.

master a part of the transference which had remained unresolved. Within a few months this was successfully accomplished and I was able to conclude my postscript with the statement that 'since then the patient has felt normal and has behaved unexceptionably, in spite of the War having robbed him of his home, his possessions and all his family relationships'. Fifteen years have passed since then, but this verdict has not proved erroneous, though certain reservations have had to be made. The patient has remained in Vienna and has made good, although in a humble social position. Several times, however, during this period, his satisfactory state of health has broken down, and the attacks of neurotic illness from which he has suffered could be construed only as offshoots of his original neurosis. Thanks to the skill of one of my pupils, Dr. Ruth Mack Brunswick, a short course of treatment has sufficed on each occasion to clear up these attacks. I hope Dr. Mack Brunswick herself will report on this case before long. Some of these relapses were caused by still unresolved residues of the transference; short-lived though the attacks were, they were distinctly paranoid in character. In other instances, however, the pathogenic material consisted of fragments from the history of the patient's childhood, which had not come to light while I was analysing him and which now came away (the comparison is obvious) like sutures after an operation or small pieces of necrotic bone. I have found the history of this man's recovery almost as interesting as that of his illness.

Since then I have employed the method of fixing a date for the termination of analysis in other cases and I have also inquired about the experience of other analysts in this respect. There can be only one verdict about the value of this device for putting pressure on the patient. The measure is effective, provided that one hits the right time at which to employ it. But it cannot be held to guarantee perfect accomplishment of the task of psycho-analysis. On the contrary, we may be quite sure that, while the impending termination of the treatment will have the effect of bringing part of the material to light, another part will be walled up, as if buried, behind it and will elude our therapeutic efforts. Once the date for discontinuing the treatment has been fixed we must not extend the time; otherwise the patient will lose all his faith in the analyst. The most obvious expedient is to let him continue his treatment with another analyst, although we know that a change of this sort involves a fresh loss of time and the sacrifice of some of the results of the work already done.

No general rule can be laid down as to the right time for resorting to this forcible technical method: the analyst must use his own tact in the matter. A mistake, once made, cannot be rectified. The saying that the lion springs once and once only must hold good here.

II

The discussion of the technical problem of how to accelerate the slow progress of analysis suggests another deeply interesting question: is there such a thing as a natural end to an analysis or is it really possible to conduct it to such an end? To judge by the ordinary talk of analysts we should presume that it is, for we often hear them say, when deploring or excusing the admitted imperfection of some fellow-mortal: 'His analysis was not finished' or 'He was not thoroughly analysed'.

Now we must first decide what is meant by the ambiguous term, 'the end of an analysis'. From the practical standpoint it is easily defined. An analysis is ended when analyst and patient cease to meet for the analytic session. This happens when two conditions have been approximately fulfilled. First, the patient must no longer be suffering from his former symptoms and must have overcome his various anxieties and inhibitions and, secondly, the analyst must have formed the opinion that so much repressed material has been brought into consciousness, so much that was inexplicable elucidated, and so much inner resistance overcome that no repetition of the patient's specific pathological processes is to be feared. If for external reasons one is prevented from reaching this goal, it is more correct to say that an analysis is incomplete than to say that it has not come to an end.

The second definition of the 'end' of an analysis is much more ambitious. According to it we have to answer the question whether the effect upon the patient is so profound that we can be certain that no further change would take place in him if his analysis were continued. The implication is that by means of analysis it is possible to attain to absolute psychic normality and to be sure that it will be maintained, the supposition being that all the patient's repressions have been lifted and every gap in his memory filled. Let us first consult our experience and see whether this really happens and then examine our theory and learn whether there is any possibility of its happening.

Every analyst will have treated some cases with this gratifying

result. He has succeeded in clearing up the patient's neurosis, there has been no relapse and no other nervous disturbance has succeeded it. We know something of what determines these results. No noticeable change had taken place in the patients' ego and the causation of their illness was pre-eminently traumatic. The ætiology of all neurosis is indeed a mixed one; either the patient's instincts are excessively strong and refuse to submit to the restraining influence of his ego or else he is suffering from the effects of premature traumas, by which I mean traumas which his immature ego was unable to surmount. Generally there is a combination of the two factors: the constitutional and the accidental. The stronger the instincts the more readily will a trauma lead to fixation, with its sequel in a disturbance of development; the more violent the trauma the more certain is it that it will have injurious effects even when the patient's instincts are of normal strength. There can be no doubt that, when the ætiology of the neurosis is traumatic, analysis has a far better chance. Only when the traumatic factor predominates can we look for that most masterly achievement of psycho-analysis, namely, such a reinforcement of the ego that a correct adjustment takes the place of that infantile solution of the patient's early conflicts which proved so inadequate. Only in such a case can one speak of a definitive end to his analysis. When such a result has been attained analysis has done all that can be required of it and need not be continued. If the patient who has made such a good recovery never produces any more symptoms calling for analysis, it still, of course, remains an open question how much of this immunity is due to a benevolent fate which spares him too searching a test.

The factors which are prejudicial to analysis and may cause it to be so long-drawn-out as to be really interminable are a constitutional strength of instinct and an unfavourable change sustained by the ego in the defensive conflict, a change comparable to a dislocation or crippling. One is tempted to make the first factor—the strength of the instincts—responsible for the second—the change in the ego—but it is clear that the latter has its own ætiology and indeed it must be admitted that our knowledge of these relations is as yet imperfect. They are only just becoming the object of analytic investigation. I think that here the analyst's interest tends to be quite wrongly orientated. Instead of inquiring *how* analysis effects a cure (a point which in my opinion has been sufficiently elucidated) we should ask what are the obstacles which this cure encounters.

This brings me to two problems which arise directly out of psycho-

analytic practice, as I hope to show by the following examples. A certain man, who had himself been a most successful practitioner of analysis, came to the conclusion that his relations with men as well as with women—the men who were his rivals and the woman whom he loved—were not free from neurotic inhibitions, and he therefore had himself analysed by an analyst whom he believed to be more expert than himself. This critical exploration of his own personality was entirely successful. He married the woman whom he loved and became the friend and teacher of the men whom he had regarded as rivals. Many years passed, during which his relation to his former analyst remained unclouded. But then, for no demonstrable external reason, trouble arose. The man who had been analysed adopted an antagonistic attitude to his analyst and reproached him for having neglected to complete the analysis. The analyst, he said, ought to have known and to have taken account of the fact that a transference-relation could never be merely positive; he ought to have considered the possibilities of a negative transference. The analyst justified himself by saying that, at the time of the analysis, there was no sign of a negative transference. But, even supposing that he had failed to observe some slight indication of it, which was quite possible considering the limitations of analysis in those early days, it was still doubtful whether he would have been able to activate a psychic theme or, as we say, a 'complex', by merely indicating it to the patient, so long as it was not at that moment an actuality to him. Such activation would certainly have necessitated real unfriendly behaviour on the analyst's part. And, besides, every happy relation between analyst and analysand, during and after analysis, was not to be regarded as transference. There were friendly relations with a real basis, which were perfectly compatible with normal life.

I now pass on to my second example, which raises the same problem. A girl who had left her childhood behind her had, since puberty, been cut off from life by an inability to walk, owing to acute pain in her legs. Her condition was obviously hysterical in character and it had resisted various kinds of treatment. After an analysis lasting nine months the trouble disappeared and the patient, whose character was truly sound and estimable, was able once more to take her place in life. In the years following her recovery she was consistently unfortunate: there were disasters in her family, they lost their money and, as she grew older, she saw every hope of happiness in love and marriage vanish. But this woman, who had formerly

been an invalid, stood her ground valiantly and in difficult times was a support to her people. I cannot remember whether it was twelve or fourteen years after the end of her analysis that she had to undergo a gynaecological examination on account of profuse hæmorrhages. A myoma was discovered which made it advisable for complete hysterectomy to be performed. From the time that this operation took place she relapsed into neurosis. She fell in love with the surgeon and was overwhelmed by masochistic phantasies of the dreadful internal changes which had taken place in her—phantasies in which she disguised her romance. She proved inaccessible to a further attempt at analysis, and to the end of her life she remained abnormal. The successful analytic treatment took place so long ago that we could not expect too much from it; it was in the first years of my work as an analyst. It is, however, possible that the patient's second neurosis sprang from the same root as the first, which had been successfully overcome, and that it was a different manifestation of repressed tendencies which analysis had only partially resolved. But I am inclined to think that, but for the fresh trauma, there would have been no second outbreak of neurosis.

These two cases, purposely selected from a large number of similar ones, will suffice to set going a discussion of the problems we are considering. The sceptical, the optimistic and the ambitious will draw very different conclusions from them. Sceptics will say that they prove that even a successful analysis does not prevent the patient who is cured for the time being from subsequently developing another neurosis, or even a neurosis springing from the same instinctual root, that is to say, from a recurrence of his former trouble. The others will maintain that this is not proved. They will object that both the cases I have cited date from the early days of analysis, twenty or thirty years ago. Since then we have acquired deeper insight and wider knowledge and, in adapting our technique to our new discoveries, we have modified it in many respects. To-day we may demand and expect that an analytic cure shall be permanent or, at least, that, if a patient falls ill again, his fresh neurosis shall not turn out to be a revival of his earlier instinctual disturbance, manifesting itself in a new guise. Our experience, they say, is not such that we must limit so strictly the demands which we may legitimately make upon psycho-analytic therapy.

Now of course my reason for selecting these particular cases as illustrations was precisely that they date so far back. It is obvious

that the more recent the result of an analysis the less valuable is it for our theoretical discussion since we have no means of predicting what will happen later to a patient who has been cured. Clearly the expectations of the optimist presuppose a number of things which are not exactly a matter of course. In the first place he assumes that it is really possible to resolve an instinctual conflict (or, more accurately, a conflict between the ego and an instinct) finally and for all time. Secondly, that when we are dealing with one such conflict in a patient, we can, as it were, inoculate him against the possibility of any other instinctual conflicts in the future. And thirdly, that we have the power, for purposes of prophylaxis, to stir up a pathogenic conflict of this sort, when at the moment there is no indication of it, and that it is wise to do so. I merely suggest these questions: I do not propose to answer them here. In any case a definite answer is perhaps not possible at the present time.

Probably some light may be thrown on the subject from the theoretical standpoint. But already another point has become clear: if we wish to fulfil the more exacting demands which are now made upon therapeutic analysis, we shall not regard the shortening of its duration as either a means or an end.

III

My analytic experience, extending now over several decades, and the change which has taken place in the nature and mode of my work encourage me to attempt an answer to the questions before us. In earlier days I dealt with a larger number of patients, who, as was natural, wanted to be cured as quickly as possible. Of late years I have been mainly engaged in training-analyses and I have also had a relatively small number of patients suffering from acute neuroses, whose treatment is carried on with longer or shorter intermissions. In these cases the therapeutic aim is no longer the same as before. There is no question of shortening the treatment: the object has been completely to exhaust the possibilities of illness and to bring about a radical change in the personality.

Of the three factors which, as we have seen, determine the results of analysis—the effect of traumas, the constitutional strength of the instincts and the changes in the ego—we are at this point concerned with the second only: the strength of the instincts. Reflection immediately suggests a doubt as to whether it is necessary to use the qualifying adjective ‘constitutional’ (or ‘congenital’). It is true

that from the very beginning the constitutional factor is of crucial importance, but it is yet conceivable that the same effects might ensue from a reinforcement of instinctual energy at some later period in life. If this were so, we should have to modify our formula and say 'the strength of the instincts at a given moment' rather than 'the constitutional strength of the instincts'. Now the first of our questions was this: is it possible for analysis permanently and definitively to resolve a conflict between instinct and ego or to settle a pathogenic instinctual claim upon the ego? To avoid misunderstanding we must perhaps define more exactly what we mean by the phrase: 'a permanent settlement of an instinctual claim'. We certainly do not mean that we cause the claim to die away, so that it never makes itself felt again. As a rule this is impossible and not even desirable. No, we mean something else, something which may be roughly described as the 'restraining' of the instinct. That is to say, it is brought into harmony with the ego and becomes accessible to the influence of the other ego-tendencies, no longer seeking for independent gratification. If we are asked how and by what means this result is achieved, we do not find it easy to answer. We say to ourselves, 'We must use a bit of magic'²: the 'magic' of metapsychology in fact. Without metapsychological speculation and theorizing—I had almost said 'phantasy'—we shall not get a step further. Unfortunately, here as elsewhere, what our magic reveals is neither very clear nor very exact. We have only one single clue to follow—but a clue the value of which cannot be exaggerated—namely, the antithesis between the primary and the secondary processes, and to this I must refer here.

Reverting to our first question, we find that our new approach to the problem makes a particular conclusion inevitable. The question was as follows: is it possible permanently and definitively to resolve an instinctual conflict? that is to say, to 'restrain' the instinctual claim in the way I have described. Formulated thus, the question contains no mention of the strength of the instinct, but it is precisely this which determines the issue. Let us be quite clear that what analysis achieves for neurotics is just what normal people accomplish for themselves without its help. But everyday experience teaches us that in a normal person any solution of an instinctual conflict holds good only so long as the instinct is of a particular degree of strength,

² 'So muss denn doch die Hexe dran'.

or rather, only so long as a particular relation is maintained between the strength of the instinct and that of the ego.³ If the latter becomes enfeebled, whether through illness, exhaustion or for some similar cause, all the instincts which have so far been successfully restrained may renew their claims and strive in abnormal ways after substitutive gratification.⁴ We have irrefutable proof of this statement in what takes place in dreams, when the reaction of the dreamer's psyche to the ego's condition in sleep is the awakening of instinctual claims.

The material relating to the strength of the instincts is equally unambiguous. Twice in the course of the development of the individual certain instincts are powerfully reinforced: at puberty and at the menopause in women. We are not in the least surprised if people who were normal before become neurotic at these times. When the instincts were not so strong these individuals succeeded in restraining them, but they can no longer do so when the instincts acquire this new strength. The repressions behave like dams in time of flood. That which occurs regularly at both these periods, when for physiological reasons the instincts become stronger, may occur sporadically as the result of accidental influences at any other period in life. Factors contributing to the reinforcement of instinct are fresh traumas, the infliction of frustration and the interaction of the various instinctual tendencies. The result is always the same and it renders the force of the quantitative factor in the causation of illness even more irresistible.

I feel as if I ought to be ashamed of so much ponderous exposition, seeing that all I have said has long been familiar and self-evident. It is a fact that we have always behaved as if we knew these things, yet for the most part our theoretical concepts fail to give the same importance to the economic as to the dynamic and topographical aspects of the case. So my excuse must be that I am drawing attention to this omission.

³ If we are to be perfectly accurate, we must say, in a particular area of this relation.

⁴ Here we have a justification of the ætiological pretensions of such indefinite factors as overwork, shock, etc. These have always been certain of general recognition and psycho-analysis has had to assign them rather into the background. It is impossible to define psychic health except in terms of metapsychology, i.e. of the dynamic relations between those institutions of the psychic apparatus, the existence of which psycho-analysis has discovered, or, if our critics will have it so, has inferred or conjectured.

Before we decide on an answer to our question, however, we must listen to an objection the force of which lies in the fact that we are very likely predisposed in its favour. It is contended that our arguments are all deduced from the spontaneous processes that take place between ego and instinct and that we assume that analytic therapy can accomplish nothing which does not occur spontaneously under favourable normal conditions. But is this really so? Is not the claim of our theory precisely that analysis produces a state which never does occur spontaneously within the ego and the creation of which constitutes the main difference between the person who has been analysed and the person who has not? Let us consider on what this claim is based. All repression takes place in early childhood; it is a primitive defensive measure adopted by the immature, feeble ego. In later years there are no fresh repressions, but the old ones persist and are used by the ego for the purpose of mastering instinct. New conflicts are resolved by what we call 'after-repression'. To these infantile repressions our general statement applies that they depend entirely on the relative power of the various psychic institutions and cannot withstand an increase in the strength of the instincts. Now analysis enables the mature ego, which by this time has attained a greater strength, to review these old repressions, with the result that some are lifted, while others are accepted but reconstructed from more solid material. These new dams have a greater power of resistance than the earlier ones; we may be confident that they will not so easily give way before the flood-tide of instinct. Thus the real achievement of analytic therapy is a subsequent correction of the original process of repression, with the result that the supremacy of the quantitative factor is brought to an end.

So far our theory, to which we must adhere unless we are irresistibly compelled to abandon it. And what is the testimony of our experience? Perhaps it is not yet wide enough to enable us to come to a definite decision. Quite often it justifies our expectations, but not always. Our impression is that we must not be surprised if the difference between the person who has not and the person who has been analysed is, after all, not so radical as we endeavour to make it and expect and assert that it will be. Thus analysis does indeed sometimes succeed in counteracting the effect of the increase in the strength of instinct, but it does not invariably do so. Sometimes its effect is simply to raise the power of the resistance put up by inhibitions, so that after

analysis they are equal to a much heavier strain than before the analysis took place or if it had never taken place at all. I really cannot commit myself to a decision on this point nor do I know whether at the present time a decision is possible.

There is another angle from which we may approach this problem of the uncertainty in the effect of analysis. We know that the first step towards the intellectual mastery of the world in which we live is the discovery of general principles, rules and laws which bring order into chaos. By such mental operations we simplify the world of phenomena, but we cannot avoid falsifying it in so doing, especially when we are dealing with processes of development and change. We are trying to discern a quantitative alteration and as a rule we neglect, at any rate at first, one of the quantitative factors. In reality the transitional and intermediate stages are far more common than the sharply differentiated opposite states. In studying various developments and changes we focus our attention entirely on the result and we readily overlook the fact that such processes are usually more or less incomplete, that is to say, the changes that take place are really only partial. A shrewd satirist of the Austria of old, J. Nestroy, once said 'Every advance is only half as great as it looks at first'. One is tempted to think that this malicious dictum is universally valid. There are almost always remains of what has been and a partial arrest at a former stage. When an open-handed Mæcenas surprises us by some isolated trait of miserliness or a person whose kind-heartedness has been excessive suddenly indulges in some unfriendly act, these are 'vestiges' of what has been and are of priceless value for genetic research. They show that every praiseworthy and valuable quality is based on compensation and over-compensation which, as was only to be expected, have not been absolutely and completely successful. Our first account of libidinal development was that an original oral phase was succeeded by a sadistic-anal, and this in its turn by a phallic-genital phase. Later investigation has not contradicted this view, but we must now qualify our statement by saying that the one phase does not succeed the other suddenly but gradually, so that part of the earlier organization always persists side by side with the later, and that even in normal development the transformation is never complete, the final structure often containing fragments of earlier libidinal fixations. We see the same thing in quite different connections. There is not one of the erroneous and superstitious beliefs of mankind that are supposed to have been left behind but has

left a residue at the present day in the lower strata of civilized peoples or even in the highest strata of cultivated society. All that has once lived clings tenaciously to life. Sometimes we are inclined to doubt whether the dragons of primæval times are really extinct.

Applying these remarks to our particular problem, I would say that the answer to the question how we explain the uncertain results of our analytic therapy might well be that our success in replacing insecure repressions by the mastery of instinct in ways that are reliable and ego-syntonic is not always complete, i.e. is not radical enough. A change does occur but it is often only partial: parts of the old mechanisms remain untouched by analysis. It is difficult to prove that this is really so. We can only judge by the result which it seems to explain. But the impressions we receive during our analytic work do not contradict this hypothesis—rather, they confirm it. We have to be careful not to imagine that the clarity of our own insight is a measure of the conviction we produce in the mind of the analysand. This conviction may lack 'depth', so to speak; the point in question is always that quantitative factor which is so easily overlooked. If we now have the correct answer to our question, we may say that analysis is always right in theory in its claim to cure neurosis by ensuring the mastery of instinct but that in practice its claim is not always justified. This is because it does not always succeed in laying sufficiently firm foundations for the mastery of instinct. The reason for this partial failure is easy to discover. The quantitative factor—the strength of the instincts—in the past opposed the efforts of the patient's ego to defend itself, and now that analysis is called in to help, that same factor limits the efficacy of this new attempt. If the instincts are excessively strong the ego fails in its task, although it is now mature and has the support of analysis, just as it failed in earlier days in its helpless state; its mastery of instinct is greater but not complete, because the change in the defence-mechanism is only partial. This is not surprising, for the power of analysis is not infinite; it is limited, and the final result always depends on the relative strength of the conflicting psychic institutions.

No doubt it is desirable to shorten analytic treatment, but we shall achieve our therapeutic purpose only when we can give a greater measure of help to the patient's ego. At one time it seemed that hypnotic influence was a splendid way of achieving our end; the reasons why we had to abandon this method are well known. Hitherto no substitute for hypnosis has been discovered, but we realize that it

was with this aim that such a master of analysis as Ferenczi devoted his last years to therapeutic experiments which were, alas ! in vain.

IV

The two related questions : whether, when dealing with one instinctual conflict, we can guard a patient against such conflicts in the future and whether it is practicable and advisable for purposes of prophylaxis to stir up a conflict which is not at the moment manifest must be treated together. Obviously the first task can be accomplished only if one performs the second, i.e. if one turns a possible future conflict into a present one and then brings analytic influence to bear upon it. This new problem is really only an extension of the earlier one. In the first instance we were considering how to guard against the return of the *same* conflict : now we are considering the possible substitution of a second conflict for the first. This sounds a very ambitious proposal but we are really only trying to make clear what limits are set to the efficacy of analytic therapy.

Tempting as it may be to our therapeutic ambition to propose such tasks for itself, experience bids us refuse them out of hand. If an instinctual conflict is not a present one and does not manifest itself in any way, it cannot be influenced by analysis. The warning that we should 'let sleeping dogs lie'—as we are so often told in connection with our investigation of the psychic underworld—is peculiarly inapposite when applied to the relations existing in psychic life. For, if the instincts are causing disturbances it is a proof that the dogs are not sleeping and if it is evident that they really are sleeping, we have not the power to wake them. This last statement, however, does not seem entirely accurate and we must consider it in greater detail. Let us consider the means we have at our disposal for transforming a latent into a present instinctual conflict. Clearly there are only two things we can do : either we can bring about situations in which the conflict becomes actual or we can content ourselves with discussing it in analysis and pointing out that it may possibly arise. The first of these two alternatives can be accomplished in two different ways, either in reality, or in the transference. In either case we expose the patient to a measure of real suffering through frustration and the damming-up of libido. Now it is true that in ordinary analytic practice we do make use of this technique. Otherwise, what would be the meaning of the rule that analysis must be carried through 'in a state of abstinence' ? But we use it when we are dealing with a conflict which is already present.

We try to bring this conflict to a head and to develop it in its most acute form in order to increase the instinctual energy necessary for its solution. Analytic experience has taught us that the better is always the enemy of the good and that in every phase of the patient's restoration we have to combat his inertia, which disposes him to be content with a partial solution of his conflicts.

If, however, our aim is the prophylactic treatment of instinctual conflicts which are not actual but merely possible, it is not enough to deal with the suffering which the patient is inevitably undergoing. We must make up our minds to conjure up fresh suffering—a thing which we have so far rightly left to fate. Public opinion would warn us against the presumption of vying with fate in putting wretched human beings to such cruel experiments. And what sort of experiments would they be? Could we, for purposes of prophylaxis, take the responsibility of destroying a happy marriage or causing a patient to give up work upon which his livelihood depended? Fortunately there is no question of having to justify such interference with real life. We have not the plenary powers which such intervention would demand and most certainly the object of this therapeutic experiment would refuse to co-operate with it. In practice then, this method may be said to be excluded and there are, besides, theoretical objections to it, for the work of analysis progresses best when the patient's pathogenic experiences belong to the past so that the ego can stand at a distance from them. In conditions of acute crisis it is almost impossible to use analysis. In such states the whole interest of the ego is concentrated on the painful reality, and resists analysis, which seeks to penetrate below the surface and to discover the influences to which the patient has been exposed in the past. Thus to create a fresh conflict will only make the analysis longer and more difficult.

It may be objected that all this discussion is quite superfluous. Nobody imagines that a latent instinctual conflict can be treated by purposely conjuring up a fresh painful situation. As a prophylactic achievement this would not be much to boast of. Let us take an example: we know that when a patient recovers from scarlatina he has become immune from a recurrence of that illness. But it never occurs to a physician on that account to infect a patient with scarlatina in order to make him immune. It is not the business of prophylactic treatment to produce the same dangerous situation as that of the illness itself but only something much more mild, as in the case of vaccination and many similar modes of treatment. Similarly, in the analytic prophyl-

laxis of instinctual conflicts the only methods which we need really consider are the other two: the artificial production of new conflicts in the transference (conflicts which lack the character of reality) and the rousing of such conflicts in the imagination of the analysand by speaking to him about them and telling him that they may possibly arise.

I do not know if we can assert that the first of these two less drastic procedures is out of the question in analysis. No experiments have been made in this particular direction. But some difficulties at once suggest themselves which make the success of such an undertaking very problematic. In the first place the choice of such situations for the transference is very limited. The analysand himself cannot embody all his conflicts in the transference, nor can the transference-situation be so employed by the analyst as to rouse all the instinctual conflicts in which the patient may possibly become engaged. We may incite him to jealousy or inflict upon him the pain of disappointed love, but no special intention is necessary for this purpose. These things happen spontaneously in most analyses. But in the second place we must not overlook the fact that any such deliberate procedure would necessitate unkind behaviour on the part of the analyst towards the patient and this would have an injurious effect upon his affectionate attitude towards the analyst, i.e. upon the positive transference which is the strongest motive of the analysand for co-operating in the work of analysis. So we shall not form any high expectation of the results of such a technique.

This leaves only the other method, which is probably the only one originally contemplated. The analyst will tell the patient about possible instinctual conflicts which may occur and will lead him to expect that they will occur in himself. This is done in the hope that the information and warning will have the effect of activating in the patient one of these conflicts in a moderate degree and yet sufficiently for it to be dealt with. But here experience speaks with no uncertain voice. The result hoped for is not achieved. The patient hears what you say but it rouses no response in his mind. He probably thinks to himself, 'That is very interesting but I see no sign of it in myself'. We have increased his knowledge but effected no other change in his mind. We have much the same situation when people read psycho-analytical writings. The reader is 'stimulated' only by those passages which he feels apply to himself, i.e. which refer to conflicts that are active in him. Everything else leaves him cold. I think we have a similar experience when we enlighten children on matters of sex.

I am far from maintaining that this is a harmful or unnecessary thing to do, but it is clear that the prophylactic effect of this liberal measure has been vastly over-estimated. After such enlightenment the children know something that they did not know before but they make no use of the new knowledge imparted to them. We come to the conclusion that they are by no means ready to sacrifice those sexual theories which may be said to be a natural growth and which they have constructed in harmony with and in dependence on their undeveloped libidinal organization—theories about the part played by the stork, about the nature of sexual intercourse and about the way in which children are born. For a long time after they have been enlightened on these subjects they behave like primitive peoples who have had Christianity thrust upon them and continue in secret to worship their old idols.

V

Our starting-point was the question how to shorten the tediously long duration of an analysis and, still pursuing the question of time, we went on to consider whether we can achieve permanent cure or prevent illness in the future by prophylactic treatment. We saw that the success of our therapeutic work depended on the influence of traumatic factors in the ætiology of the neurosis, on the relative strength of the instincts which have to be mastered and on something which we called modification of the ego. Only the second of these factors has been discussed in any detail and we have had occasion in so doing to recognize the paramount importance of the quantitative factor and to stress the claim of the metapsychological standpoint to be taken into account in any attempt at explanation.

Of the third factor, the modification of the ego, we have as yet said nothing. The first impression received when we turn our attention to it is that there is much to ask and to answer, and that what we can say on the subject will prove very inadequate. This impression is confirmed when we go into the problem further. We know that the essence of the analytic situation is that the analyst enters into an alliance with the ego of the analysand to subdue certain parts of his id which he has failed to master, i.e. to include them in the synthesis of the ego. The fact that in the case of psychotics this co-operation is never successful brings us to our first definite conclusion. If we want to make a compact with the patient's ego, that ego must be normal. But such a normal ego is, like normality in general, an ideal fiction. The abnormal ego which is of no use for our purpose is un-

fortunately no fiction. Now every normal person is only approximately normal: his ego resembles that of the psychotic in one point or another, in a greater or lesser degree, and by its distance from one end of the scale and his proximity to the other we may provisionally estimate the extent of that which we have so indefinitely called the 'modification of the ego'.

If we ask what is the source of the infinite variety of kinds and degrees of ego-modification we cannot escape the first obvious alternative that such modifications are either congenital or acquired. The second case will be the easier to treat. If they are acquired it must certainly have been during the individual's development from the very beginning of his life. From the very outset the ego has to try to fulfil its task of acting as an intermediary between the id and the outside world in the service of the pleasure-principle, to protect the id from the dangers of the outside world. If, while thus endeavouring, the ego learns to adopt a defensive attitude towards its own id and to treat the instinctual demands of the latter like external dangers, this is at any rate partly because it understands that gratification of instinct would lead to conflicts with the outside world. Under the influence of its upbringing, the child's ego accustoms itself to shift the scene of the battle from outside to inside and to master the *inner* danger before it becomes *external*. Probably it is generally right in so doing. In this battle on two fronts—later there is a third front as well—the ego makes use of various methods of fulfilling its task, i.e. to put it in general terms, of avoiding danger, anxiety and unpleasure. We call these devices *defence-mechanisms*. Our knowledge of them is as yet incomplete. Anna Freud's book has given us our first insight into their multiplicity and their manifold significance.⁵

One of these mechanisms, that of repression, provided the starting-point for the study of neurotic processes in general. There was never any doubt that repression was not the only method which the ego could employ for its purposes. Nevertheless, repression is something quite peculiar, more sharply differentiated from the other mechanisms than these are from one another. I think I can make its relation to these other mechanisms clear by a comparison, but I know that comparisons never carry us very far in such a context. Let us imagine what might have happened to a book at the time when books were not printed in editions but written out separately by hand. We will imagine that such a book contained statements which at a later time

⁵ Anna Freud, *The Ego and the Mechanisms of Defence*. Hogarth Press.

would be regarded as undesirable. For instance, Robert Eisler⁶ maintains that the writings of Flavius Josephus must have contained passages about Jesus Christ which were offensive to later Christendom. At the present day the only defence-mechanism to which the official censor would resort would be the confiscation and destruction of every copy of the whole edition. At that time other methods were employed to render the book innocuous. Either the offensive passages were heavily obliterated, so that they were illegible, in which case they could not be transcribed and the next copyist of the book produced a text to which no exception could be taken but which had gaps in certain places, probably making the passages in question unintelligible. Or, not satisfied with this, they tried to conceal any indication that the text had been mutilated. They therefore proceeded to tamper with the text. Single words here and there were left out or replaced by others and whole new sentences were interpolated; at best, the passage was completely erased and replaced by another in exactly the opposite sense. When the book was next transcribed the text aroused no suspicion but had, in fact, been falsified. It no longer contained the author's statement and very probably the correction was not in the interests of truth.

Without pressing the comparison too closely we may say that repression is to the other methods of defence what the omission of words or passages is to the corruption of a text, and in the various forms of this falsification we can discover analogies to the manifold ways in which the ego may be modified. It may be objected that this comparison breaks down in an essential particular, for the corruption of a text is the work of a tendentious censorship to which we have no counterpart in the development of the ego. But this is not so, for this tendency is amply represented by the compelling force of the pleasure-principle. The psychic apparatus is intolerant of unpleasure and strives to ward it off at all costs and, if the perception of reality involves unpleasure, that perception—i.e. the truth—must be sacrificed. For quite a long time flight and an avoidance of a dangerous situation serve as expedients in the face of external danger, until the individual is finally strong enough to remove the menace by actively modifying reality. But one cannot flee from oneself and no flight avails against danger from within; hence the ego's defence-mechanisms are con-

⁶ Robert Eisler, *Jesus Basileus*. Religionswissenschaftliche Bibliothek, begründet von W. Streitberg, Band 9, Heidelberg bei Carl Winter, 1929.

demned to falsify the inner perception, so that it transmits to us only an imperfect and travestied picture of our id. In its relations with the id the ego is paralysed by its restrictions or blinded by its errors, and the result in the sphere of psychic processes may be compared to the progress of a poor walker in a country which he does not know.

The purpose of the defence-mechanisms is to avert dangers of various kinds. It cannot be disputed that they are successful; it is doubtful whether the ego can altogether do without them during its development, but it is also certain that they themselves may become dangerous. Not infrequently it turns out that the ego has paid too high a price for the services which these mechanisms render. The expenditure of energy necessary to maintain them and the ego-restrictions which they almost invariably entail prove a heavy burden on the psychic economy. Moreover these mechanisms are not relinquished after they have helped the ego through the difficult years of its development. Of course, no individual makes use of all the possible mechanisms of defence: each person merely selects certain of them, but these become fixated in his ego, establishing themselves as regular modes of reaction for that particular character, which are repeated throughout life whenever a similar situation occurs to that which originally evoked them. They are, in fact, infantilisms and share the fate of so many institutions which struggle to maintain themselves when they have outlived their usefulness. 'Reason becomes unreason, beneficence a torment',⁷ as the poet laments. The adult ego with its greater strength continues to defend itself against dangers which no longer exist in reality and even finds itself impelled to seek out those real situations which may serve as a substitute for the original danger, so as to be able to justify its clinging to its habitual modes of reaction. Thus the defence-mechanisms produce an ever-growing alienation from the outside world and a permanent enfeeblement of the ego and we can easily understand how they pave the way for and precipitate the outbreak of neurosis.

For the moment, however, we are not concerned with the pathogenic rôle of the defence-mechanisms. Our purpose is to discover how our therapeutic work is affected by the ego-modification they produce. The material for the answer to this question is contained in Anna Freud's work, to which I have already referred. The main point is that the analysand repeats these modes of reaction during

⁷ 'Vernunft wird Unsinn, Wohltat Plage'.

analysis itself, exhibiting them, as it were, before our eyes; in fact that is the only means we have of learning about them. This must not be taken to imply that they make analysis impossible. On the contrary, they constitute half of our analytic task. The other half, the first to be tackled by analysis in its early days, is the revelation of that which is hidden in the id. In our therapeutic work we constantly alternate between the id and the ego, analysing now a fragment of the one and now of the other. In the one case our aim is to bring a part of the id into consciousness and in the other to correct something in the ego. The crux of the matter is that the mechanisms of defence against former dangers recur in analysis in the shape of *resistances* to cure. The consequence is that the ego's attitude to the cure itself is that of defence against a new danger.

The therapeutic effect of analysis depends on the bringing into consciousness of that which is, in the widest sense, repressed within the id. We prepare the way for this operation by our interpretations and constructions, but so long as the ego clings to its former defences and refuses to abandon its resistances we have interpreted merely to our own satisfaction, not to that of the patient. Now these resistances, although they belong to the ego, are nevertheless unconscious and, in a certain sense, they are in a position of isolation within the ego. The analyst recognizes them more easily than the hidden material in the id; one would suppose it would be enough to treat them as parts of the id and to bring them into relation with the rest of the ego by introducing them to the patient's consciousness. This would mean that half of our analytic task had been accomplished: we are hardly prepared for a resistance to the discovery of resistances. But what takes place is as follows. While we are analysing the resistances, the ego—more or less of set purpose—breaks the compact upon which the analytic situation is based. It ceases to support us in our efforts to reveal the id, it opposes these efforts, disobeys the fundamental rule of analysis and suffers no further derivatives of repressed material to emerge into consciousness. It is too much to expect that the patient should have a firm conviction of the curative power of analysis, but he may have come to the analyst with a certain amount of confidence and this, reinforced by the various factors in the positive transference which it is our business to evoke makes him capable of doing his share. The effect of the unpleasurable impulses which he feels stirring in him when his defensive conflicts are once more roused may be that the negative transference takes the field and the

whole analytic situation is broken up. The patient now regards the analyst simply as an alien personality who makes disagreeable demands upon him and he behaves towards him exactly like a child who does not like a stranger and has no confidence in him. If the analyst tries to explain to the patient one of the distortions which his defence has produced and to correct it, he meets with a complete lack of comprehension and an imperviousness to valid arguments. We see then that there really is a resistance to the discovery of resistances and the defence-mechanisms do deserve the name which we originally gave them before they had been more closely examined ; there are resistances not only to the bringing of id-contents into consciousness but also to the whole process of analysis and so to cure.

The effect which the defensive activities produce within the ego is rightly described as 'modification of the ego', if by this we understand the deviation of the ego from an imaginary norm which would ensure the patient's unswerving loyalty to his undertaking when he entered upon analysis. We can well believe what our daily experience suggests, that the outcome of an analysis depends principally upon the strength and depth of the roots of the resistances constituting the ego-modification. Once more we realize the importance of the quantitative factor and once more we are reminded that analysis has only certain limited quantities of energy upon which to draw when matching itself with the hostile forces. And it does seem as if victory were really for the most part with the big battalions.

VI

Our next question will be whether all ego-modification (in the sense in which we are using the term) is acquired during the defensive conflicts of early childhood. There can be no doubt about the answer. We have no reason to dispute the existence and importance of primal, congenital ego-variations. The single fact is decisive that every individual selects only certain of the possible defence-mechanisms and invariably employs those which he has selected. This suggests that each individual ego is endowed from the beginning with its own peculiar dispositions and tendencies, though we cannot predicate their nature and conditioning factors. Moreover, we know that we must not exaggerate the difference between inherited and acquired characteristics into an antithesis ; that which has been acquired by our ancestors is certainly an important part of what we inherit. When we speak of 'archaic inheritance' we are generally thinking only

of the id and apparently we assume that an ego was non-existent at the beginning of the individual's life. But we must not overlook the fact that id and ego are originally one, and it does not imply a mystical over-estimation of heredity if we think it credible that, even before the ego exists, its subsequent lines of development, tendencies and reactions are already determined. The psychological peculiarities of families, races and nations, even in their attitude towards analysis, admit of no other explanation. Nay, more, analytic experience convinces us that particular psychic contents, such as symbolism, have no other source than that of hereditary transmission, and research in various fields of folk-psychology seems to justify the assumption that in archaic inheritance there are other, no less specialized, deposits from primitive human development.

When we recognize that the peculiarities of the ego which we detect in the form of resistances may be not only acquired in defensive conflicts but transmitted by heredity, the topographical differentiation between ego and id loses much of its value for our investigations. When we advance a step further in analytic experience we come upon resistances of another type, which we can no longer localize and which seem to be conditioned by certain fundamental relations within the psychic apparatus. I can give only a few examples of the type of resistance to which I refer: this whole field of inquiry is still bewilderingly strange and has not been sufficiently explored. We come across people, for instance, of whom we should say that they display a peculiar 'adhesiveness of the libido'. The processes to which their analysis gives rise are so much slower than in other people because they apparently cannot make up their minds to detach libidinal cathexes from one object and displace them to another, although there is no particular reason for such cathectic fidelity. Then we meet the opposite type in which the libido seems specially mobile: it readily enters upon the new cathexes suggested by the analysis, abandoning its former ones for these. The difference between the two types is comparable to that experienced by a sculptor according as he works in hard stone or soft clay. Unfortunately in the latter type the results of analysis often prove very evanescent; the new cathexes are soon abandoned and one feels not as if one had worked in clay but as if one had written in water. The old saw 'Light come, light go'⁸ proves true here.

In another group of patients we are surprised by an attitude which

⁸ 'Wie gewonnen, so zerronnen'.

we can only put down to a loss of the plasticity we should expect, an exhaustion of the capacity for change and development. We are indeed prepared for a certain degree of psychic inertia in analysis; when new paths are pointed out for the instinctual impulses, we almost invariably see that there is an obvious hesitation in entering upon them. We have described this attitude, though perhaps not quite rightly, as 'resistance from the id'. But in the cases which I have in mind all the mental processes, relations and distributions of energy are immutable, fixed and rigid. One finds the same state of affairs in very old people, when it is explained by the so-called force of habit, the exhaustion of receptivity through a kind of psychic entropy; but I am thinking of people who are still young. Our theoretical knowledge does not seem adequate to explain these types. Probably some element of time is at work here, changes in some rhythm in the development of psychic life which we have not yet apprehended.

In yet another group of cases the patients' resistance to analysis and the obstacles in the way of cure are probably due to variations in the ego which spring from another and even deeper root. Here we come to the ultimate phenomena to which psychological research has penetrated—the behaviour of the two primal instincts, their distribution, fusion and defusion, things which we cannot imagine to be confined to a single province of the mental apparatus, whether it be id, ego or super-ego. Nothing impresses us more strongly in connection with the resistances encountered in analysis than the fact that there is a force which defends itself by all possible means against recovery and clings tenaciously to illness and suffering. We have recognized that part of this force is the consciousness of guilt and the need for punishment, and this is undoubtedly correct; we have localized it in the ego's relation to the super-ego. But this is only one element in it, that which may be described as psychically bound by the super-ego and which we perceive in this form. We may suppose that other portions of the same force are at work, either bound or free, in some unspecified region of the psyche. If we bear in mind the whole picture made up of the phenomena of the masochism inherent in so many people, of the negative therapeutic reaction and of the neurotic's consciousness of guilt, we shall have to abandon the belief that psychic processes are governed exclusively by the striving after pleasure. These phenomena are unmistakable indications of the existence of a power in psychic life which, according to its aim, we call the instinct of aggression or destruction and which we derive from

the primal death-instinct of animate matter. It is not a question of an optimistic as opposed to a pessimistic theory of life. Only by the interaction and counteraction of the two primal instincts—Eros and the death-instinct, never by one or the other alone, can the motley variety of vital phenomena be explained.

How the elements of these two types of instinct combine to fulfil the various vital functions, under what conditions such coalitions tend to dissolve and finally break up, what disturbances correspond to these changes and what sensations they evoke in the perceptual gamut of the pleasure-principle—these are problems whose elucidation would be the most valuable achievement of psychological research. For the moment we must bow to those superior powers which foil our attempts. Even to exert a psychic influence upon a simple case of masochism is a severe tax on our skill.

In studying the phenomena which testify to the activity of the instinct of destruction we are not confined to the observation of pathological material. There are countless facts in normal mental life which require this explanation, and the keener the power of our discernment the greater the abundance in which they present themselves to our notice. The subject is too novel and too important to be treated as a side-issue in this discussion ; I will content myself with selecting a few specimens of these phenomena. Here is an example : It is well known that at all times there have been, as there still are, human beings who can take as their sexual objects persons of either sex and that the one orientation is no impediment to the other. We call these people bisexual and accept the fact of their existence without wondering much at it. But we have come to know that all human beings are bisexual in this sense and that their libido is distributed between objects of both sexes, either in a manifest or a latent form. But the following point strikes us. While in the individuals I first mentioned the libidinal impulses can take both directions without producing a clash, in other and more frequent cases the result is an irreconcilable conflict. A man's heterosexuality will not tolerate homosexuality, and vice versâ. If the former tendency is the stronger, it succeeds in keeping the latter in a state of latency and preventing its attaining real gratification. On the other hand there is no greater danger for a man's heterosexual function than that of disturbance by latent homosexuality. We might explain these facts by saying that each individual has only a given quantity of libido at his disposal and that the two rival orientations have to contend for it. But it is not clear why these rivals

should not regularly divide between them the available quantity of libido, according to their relative strength, as does happen in some cases. We are forced to conclude that there is something peculiar in the tendency to conflict, something which introduces a new element into the situation, independently of the quantity of libido. It is difficult to account for this spontaneous tendency to conflict except as the intervention of an element of free aggression.

If we recognize that the case which I have just described is a manifestation of the instinct of destruction or aggression we are at once confronted with the question whether this notion should not be extended to apply to other instances of conflict, or, indeed, whether we ought not to review all our knowledge of psychic conflict from this new angle. We assume that, in the course of the development of human beings from their primitive state to civilization a considerable part of their aggression is internalized, turned inwards and, if this is so, inner conflicts are certainly the correct equivalent of the external conflicts which have now ceased. I am well aware that the dualistic theory according to which an instinct of death, destruction or aggression claims equal partnership with Eros as manifested in libido, has met with little general acceptance and has not really established itself even among psycho-analysts. My delight was proportionately great when I recently discovered that our theory was held by one of the great thinkers of ancient Greece. So glad am I of this confirmation that I willingly sacrifice the prestige of originality, especially as I read so widely in earlier years that I can never be quite certain that what I thought was a creation of my own mind may not really have been an outcome of cryptomnesia.

Empedocles of Akragas (Girgenti),⁹ born about 495 B.C., is one of the grandest and most remarkable figures in the history of Greek civilization. The interests of this many-sided personality took the most varied directions. He was a scientist and thinker, a prophet and worker of miracles, a politician, a philanthropist and a physician versed in natural science. He was said to have freed the town of Selinus from malaria, and his contemporaries worshipped him as a god. In his mind the sharpest contrasts seem to have co-existed; exact and sober in his investigations in physics and physiology, he did not recoil from obscure mysticism and he indulged in cosmic speculations of astonishingly fantastic boldness. Capelle compares him with

⁹ I have based what follows on a work by Wilhelm Capelle, *Die Vorsokratiker*. Alfred Kröner, Leipzig, 1935.

Dr. Faustus, 'to whom many a secret was revealed'. Born at a time when the realm of science was not yet divided into so many provinces, he held some theories which inevitably strike us as primitive. He explained the variety of things by the fusion of the four elements, earth, water, fire and air, and he held that all nature was animate and believed in the transmigration of souls. At the same time, however, he had such modern ideas as that of the gradual evolution of living beings, the survival of the fittest and the recognition of the rôle of chance (*τύχη*) in this development.

The theory of Empedocles which specially claims our attention is that which approximates so closely to the psycho-analytical theory of instinct that we should be tempted to maintain that the two are identical, were it not for this difference: the Greek's theory is a cosmic phantasy, while our own confines itself to its biological application. At the same time, the fact that Empedocles ascribed to the universe the same principle of animation as is manifested in each individual living creature makes this difference considerably less important.

The Greek philosopher taught that there were two principles of natural process in the life of the universe as in that of the mind and that these principles were eternally in conflict with one another. He called them *φιλία*—love—and *νεῖκος*—strife. The one of these powers, which he really conceived of as natural forces working as instincts, and certainly not as intelligences with a conscious aim,¹⁰ strives to unite the atoms of these four elements in one great sphere, while the other seeks to dissolve these fusions and to separate the atoms of the elements. Empedocles conceives of the world-process as a continuous, never-ceasing alternation of periods in which the one or the other of the two fundamental forces triumphs, so that at one time love and, at another time, strife fulfils its purpose and governs the universe, after which the other vanquished power asserts itself and in its turn prevails.

The two fundamental principles of Empedocles—*φιλία* and *νεῖκος*—are, both in name and in function, the same as our two primal instincts, *Eros* and *Destruction*, the former of which strives to comprehend existing phenomena in ever greater unities, while the latter seeks to dissolve these combinations and destroy the forms to which they have given rise. But we shall not be surprised to find that this theory has

¹⁰ Loc. cit. S. 186.

changed in certain respects on its re-emergence after two and a half thousand years. Apart from the limitations imposed upon us by the biopsychical standpoint, we no longer take as our fundamental elements the four elements of Empedocles; animate matter is now sharply differentiated from inanimate and we no longer think of the mingling and separation of particles of matter but of the fusion and defusion of instinct-components. Moreover, we now have a certain biological basis for the principle of 'strife', since we trace the instinct of destruction to the death-instinct, the urge of animate matter to return to its inanimate state. We are of course not asserting that this instinct first arose with the dawning of life or denying that it existed before. And nobody can foresee in what guise the nucleus of truth contained in the theory of Empedocles will present itself to the vision of a later day.

VII

In 1927, S. Ferenczi read a paper, entitled *Das Problem der Beendigung der Analysen*¹¹, which contained an abundance of valuable material. He concluded it with the comforting assurance that 'analysis is by no means an interminable process. On the contrary, if the analyst has a thorough knowledge of his business and a sufficient fund of patience the treatment can be carried to a natural conclusion'. This paper as a whole does, however, seem to me to convey a warning not to aim at the shortening but rather at the deepening of the analytic process. Ferenczi makes the further important point that success very largely depends upon the analyst's having profited by the lesson of his own 'errors and mistakes, and got the better of 'the weak points in his own personality'. This is an important contribution to our problem. Amongst the factors which influence the prospects of an analysis and add to its difficulties in the same manner as the resistances, we must reckon not only the structure of the patient's own ego but the personal characteristics of the analyst.

It cannot be disputed that analysts do not in their own personalities wholly come up to the standard of psychic normality which they set for their patients. Opponents of analysis are wont to point this out derisively and use it as an argument to prove the uselessness of the analytic method. We might seek to refute the criticism by asserting that it makes an unjustifiable demand upon analysts, who are individuals trained in the practice of a certain art and are presumably ordinary

¹¹ *Internationale Zeitschrift für Psychoanalyse*, Bd. XIV, 1928.

human beings. Nobody surely maintains that a physician is incapable of treating internal diseases because his own internal organs happen to be unsound. On the contrary, it may be argued that there is a certain advantage when a man who is himself threatened with tuberculosis specializes in the treatment of that disease. But the cases are not on all fours. So long as he is capable of practising at all, a physician suffering from lung or heart trouble is not handicapped in diagnosing or treating internal disease. The analyst, on the other hand, because of the peculiar conditions of his work is really prevented by his own defects from discerning his patient's situation correctly and reacting to it in a manner conducive to cure. So there is some reason in the demand for a high degree of psychic normality and correct adjustment in the analyst as evidence of his qualifications for his work. And there is another point: he must be in a superior position to that of his patient if he is to serve as a model for the latter in certain analytic situations and, in others, to act as his teacher. Finally, we must not forget that the relationship between analyst and patient rests on the love of truth as its foundation, that is, on the acknowledgment of reality, and it precludes every sort of sham and deception.

Here let us pause for a moment to assure the analyst that he has our sincere sympathy in the very exacting requirements of his practice. It almost looks as if analysis were the third of those 'impossible' professions in which one can be sure only of unsatisfying results. The other two, as has long been agreed, are the bringing-up of children and the government of nations. Obviously we cannot demand that the prospective analyst should be a perfect human being before he takes up analysis, so that only persons of this rare and exalted perfection should enter the profession. But where and how is even the most inadequate of individuals to acquire the ideal qualifications for his work? The answer is: in his own analysis, with which he begins his training. For practical reasons this analysis can be only short and incomplete: the main object of it is to enable the training-analyst to form an opinion whether the candidate should be accepted for further training. The training-analysis has accomplished its purpose if it imparts to the novice a sincere conviction of the existence of the unconscious, enables him through the emergence of repressed material in his own mind to perceive in himself processes which otherwise he would have regarded as incredible and gives him a first sample of the technique which has proved to be the only correct method in

conducting analyses. This in itself would not constitute an adequate training, but we hope and believe that the stimuli received in the candidate's own analysis will not cease to act upon him when that analysis ends, that the processes of ego-transformation will go on of their own accord and that he will bring his new insight to bear upon all his subsequent experience. This does indeed happen and, just in so far as it happens, it qualifies the candidate who has been analysed to become an analyst.

Unfortunately something else happens as well. One can only give one's impressions in describing this second result. Hostility on the one hand and partisanship on the other create an atmosphere unfavourable to objective investigation. It does look as if a number of analysts learn to apply defence-mechanisms which enable them to divert the conclusions and requirements of analysis from themselves, probably by applying them to others. They themselves remain as they are and evade the critical and corrective influence of analysis. Perhaps this confirms the dictum of a writer who warns us that it is hard for a mortal who acquires power not to misuse it.¹² Sometimes, when we try to understand this attitude in analysts, we are irresistibly and disagreeably reminded of the effect of the X-rays on those who use them without due precaution. We can hardly be surprised if constant pre-occupation with all the repressed impulses which struggle for freedom in the human psyche sometimes causes all the instinctual demands which have hitherto been restrained to be violently awakened in the analyst himself. These are 'dangers of analysis', threatening not the passive but the active partner in the analytic situation, and it is our duty to face them. There can be no doubt how they must be encountered. Every analyst ought periodically himself to submit to analysis, at intervals of, say, five years, without any feeling of shame in so doing. This is as much as to say that not only the patient's analysis but that of the analyst himself is a task which is never finished.

At this point we must guard against a misconception. It is not my intention to assert that analysis in general is an interminable business. Whatever our theoretical view may be, I believe that in practice analyses do come to an end. Every analyst of experience will be able to think of a number of cases in which he has taken permanent leave of the patient *rebus bene gestis*. There is a far greater discrepancy between theory and practice in cases of so-called character-

¹² Anatole France, *La révolte des anges*.

analysis. Here it is not easy to predict a natural end to the process, even if we do not look for impossibilities or ask too much of analysis. Our object will be not to rub off all the corners of the human psyche so as to produce 'normality' according to schedule nor yet to demand that the person who has been 'thoroughly analysed' shall never again feel the stirrings of passions in himself or become involved in any mental conflict. The business of analysis is to secure the best possible psychological conditions for the functioning of the ego; when this has been done, analysis has accomplished its task.

VIII

Both in therapeutic and character-analyses we are struck by the prominence of two themes which give the analyst an extraordinary amount of trouble. We soon come to the conclusion that some general principle is at work here. These two themes are connected with the difference between the sexes: one is characteristic of men and the other equally characteristic of women. In spite of the difference in content there is an obvious correspondence between the two. Some factor common to both sexes is forced, by the difference between them, to express itself differently in the one and in the other.

The two corresponding themes are, in women, envy of the penis—the striving after the possession of a male genital—and, in men, the struggle against their passive or feminine attitude towards other men. In its early days psycho-analysis defined this common factor as the individual's attitude to the castration-complex. Subsequently Alfred Adler coined the term 'masculine protest', which, in the case of men, is exactly right. I think that, from the beginning, 'repudiation of femininity' would have been the correct description of this remarkable feature in the psychic life of mankind.

Supposing that we now try to introduce this notion into the structure of psycho-analytical theory we shall find that, by its very nature, this factor cannot occupy the same place in the case of both sexes. In males the masculine striving is from the beginning and throughout entirely ego-syntonic; the passive attitude, since it necessitates the assumption of castration, is energetically repressed and often the only indications of its existence are exaggerated over-compensations. In females also the striving after masculinity is consonant with the ego at a certain period, namely, in the phallic phase, before development in the direction of femininity has set in. But later it succumbs to that momentous process of repression, the outcome of which (as

has often been pointed out) determines the fate of the woman's femininity. A great deal depends upon whether a sufficient amount of her masculinity-complex escapes repression and exercises a lasting influence on her character. Normally large portions of that complex undergo transformation and contribute to the development of femininity. The unsatisfied wish for a penis is destined to be converted into a wish for a child and for a man, who possesses a penis. Very often indeed, however, we find that the wish for masculinity persists in the unconscious and, in its repressed state, exercises a disturbing influence.

As is plain from what has just been said, in both cases it is the attitude of the opposite sex which succumbs to repression. I have stated elsewhere¹³ that it was Wilhelm Fliess who called my attention to this point. Fliess was inclined to regard the difference between the sexes as the true cause and original motive of repression. I can only repeat that I do not accept this view: I do not think we are justified in sexualizing repression in this way—that is to say, in explaining it on a biological instead of a purely psychological basis.

The paramount importance of these two themes—the wish for a penis in women and, in men, the struggle with passivity—did not escape the notice of Ferenczi. In the paper that he read in 1927 he laid it down as a principle that in every successful analysis these two complexes must have been resolved.¹⁴ From my own experience I would observe that in this I think Ferenczi was asking a very great deal. In no phase of one's analytic work does one suffer more from the oppressive feeling that all one's efforts have been in vain and from the suspicion that one is 'talking to the winds' than when one tries to persuade a female patient to abandon her wish for a penis as impossible and to convince a male patient that a passive attitude towards another man does not always signify castration and that in many relations in life it is inevitable. The rebellious over-compensation of the male produces one of the strongest transference-resistances. A man will not be subject to a father-substitute or owe him anything and he therefore refuses even to accept his cure from the physician.

¹³ 'A Child is being Beaten', *Collected Papers*, Vol. II.

¹⁴ ' . . . in every male patient the sign that his castration-anxiety has been mastered must be forthcoming, and this sign is a sense of equality of rights with the analyst; and every female patient, if her cure is to rank as complete and permanent, must have finally conquered her masculinity-complex and become able to submit without bitterness to thinking in terms of her feminine rôle'. (Loc. cit. S. 8).

There is no analogous form of transference which can ensue from the feminine wish for a penis, but it is the source of attacks of acute depression, because our woman patients feel an inner conviction that the analysis will avail them nothing and they will be none the better for it. We can only agree with them when we discover that their strongest motive in coming for treatment was the hope that they might somehow still obtain a male organ, the lack of which is so painful to them.

All this shows that the form of the resistance is immaterial: it does not matter whether it belongs to the transference or not. The vital point is that it prevents any change from taking place in the patient's psyche—everything remains as it was. We often feel that, when we have reached the penis-wish and the masculine protest, we have penetrated all the psychological strata and reached 'bedrock' and that our task is accomplished. And this is probably correct, for in the psychic field the biological factor is really the rock-bottom. The repudiation of femininity must surely be a biological fact, part of the great riddle of sex.¹⁵ Whether and when we have succeeded in mastering this factor in an analysis is hard to determine. We console ourselves with the certainty that everything possible has been done to rouse the analysand to examine and to change his attitude in this respect.

¹⁵ We must not be misled by the term 'masculine protest' into supposing that what the man repudiates is passivity, or, as we may say, the social aspect of femininity. Such a notion is speedily contradicted by the observation that the attitude such men display towards women is often masochistic or actually slavish. What they reject is not passivity in general but passivity in relation to other men. That is to say, the 'masculine protest' is really simply castration-anxiety.

THE PROBLEM OF THE GENESIS OF PSYCHICAL CONFLICT IN EARLIEST INFANCY ¹

REMARKS ON A PAPER BY JOAN RIVIERE

BY

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During the last few years different psycho-analytical writers in our literature have evinced growing interest in the early phases of ego-development, and pioneer work has been done in various quarters with the object of throwing light on this obscure subject. One such piece of work, which has been carried out with special thoroughness, stimulated the considerations I propose to put before you in this paper. A body of observations and theories has been accumulated, to which various writers have contributed. I would mention especially the works of Melanie Klein, which are based on her experience of the analysis of children conducted by means of the play-methods which she was the first to introduce ; these theories are presented as a whole in her book *The Psycho-Analysis of Children*, ² but her writings on this subject go back to the year 1923. Ernest Jones has conducted a number of investigations from a similar standpoint ; his writings deal principally with female sexual development, with problems concerning hate and the sense of guilt, and with the condition which he calls aphanisis. The material for these writings has been amassed during more than two decades. Joan Riviere has treated problems of the neuroses in the light of these theories in some papers and we are also indebted to her for an exposition of the whole subject that is remarkable for its lucidity.³ Edward Glover has studied problems of ego-development and the option of neurosis, the genesis of obsessional neurosis and addiction to alcohol, etc., and has considered the possible application of his conclusions to sociology. James Strachey has examined the therapeutic process from the angle of these theories. John Rickman and others have dealt with their bearing on the upbringing of children.

¹ The following paper embodies the conclusions of many discussions which have taken place on these problems amongst members of the Vienna Psycho-Analytical Society. For some of these conclusions I alone am responsible ; in other cases I have made use of ideas contributed by others.

² Hogarth Press, 1932.

³ Joan Riviere, 'On the Genesis of Psychical Conflict in Earliest Infancy', this JOURNAL, Vol. XVII, 1936.

A large number of other writings testifies to the fruitfulness of the views in question and their applicability in various fields.⁴

Now the authors named are far from being in complete agreement ; some of their hypotheses vary greatly. I will give a single example of this difference of opinion. Glover⁵ explains the phenomenon of *ambivalence* from the succession of great fluctuations of introjection and projection, the swing of the pendulum between the two being very wide during the first year of life while their subsequent alternation follows more rapidly on one another, with a lesser swing, during the second year. That is to say, ambivalence is a very swift alternation between processes of introjection and projection with a comparatively small degree of intensity. Joan Riviere⁶ holds that the basis of ambivalence is the child's attempt to keep the image of the good object separate from that of the bad, for, if they were to merge, the good object itself would no longer be really good and the child would have no refuge, and no support for its reparation-tendencies. This is an instance of two quite different theories appearing in this group of writings and it may be asked whether there is any justification for presenting these theories together and making them a common starting-point for our discussion, seeing that they do not agree in all particulars.

Now I think that in spite of this and a number of other divergences all these theories have a common element, so that they may rightly be considered together. The following seem to me to be the points they have in common :

(1) It is invariably assumed (*a*) that the experiences of the individual at a very early period of life, above all during the first year, are known to us or at least are discernible by means of analysis like the experiences at later periods, (*b*) that they can be described in terms of mental life, (*c*) that they are of great importance in the later development of neuroses and the formation of character, and (*d*) that throughout this early period phantasy is active or at least that there is a kind of psychic life which approximates and is comparable to what we generally speak of as phantasy and that these psychic activities are consolidated and developed in a degree far beyond that which Freud and other writers are inclined to attribute to them at this age.

⁴ Cf. the bibliography given at the end of Joan Riviere's paper.

⁵ 'A Developmental Study of Obsessional Neurosis', this JOURNAL, Vol. XVI, 1935, p. 142.

⁶ *Loc. cit.*, pp. 405-6.

(2) It is assumed that these processes during the infant's first year are on the instinctual side determined by oral-sadistic impulses and on the side of the ego-mechanisms by the processes of introjection and projection.

In this respect these theories approximate closely to various psycho-analytical conclusions arrived at by Freud and to the views embodied in Abraham's writings, but in respect both of their generalizations and of the question of date the writers whom I have in mind go beyond what is held by all analysts in this connection.

(3) The instinctual side and the ego-side of the experiences of early infancy are represented as being closely related. For instance, cannibalistic impulses are held to be the basis of mechanisms of introjection and anal excretion that of the mechanism of projection. From this point instinctual development and ego-development continue to be closely related and are shown to be interwoven in a remarkable manner.

(4) Further, in all the works mentioned the relation between phantasy and reality is conceived of in a somewhat different form from that commonly accepted in psycho-analysis. Although the fundamental principle of Freud's complementary series is consistently adhered to, much of what we have been accustomed to account for by the interplay between the individual and his environment is explained as the product of an inner phantasy-activity, which is evoked and intensified by external experiences but which would occur in essentially the same way even without such experiences. There are two possible views, one at either end of the scale, with regard to predisposition and environmental influences. According to the one, the living being is regarded as so much plastic material upon which its accidental environment leaves manifold imprints, while, according to the other, that being has already its definite form and its development is at most accelerated or retarded by the influence of environment. These are two extreme conceptions between which Freud always endeavoured to hold a middle line. The authors I have quoted seem to incline more to the second possibility than do other analysts.

(5) By devoting their attention to the experiences of early infancy and deriving from these initial processes the later phases in the evolution of the infantile psyche these writers place great weight on certain early processes, the existence of which they have inferred or conjectured. Other factors tend to be relegated to the background: amongst these I will mention especially the classical Œdipus situation and the closely allied castration-complex on the instinctual side and, on the ego-side,

all those later, higher elaborations, attempts at solving conflicts, methods of defence against anxiety and unpleasure, and so forth, which certainly exercise a decisive influence upon the later fate of the neuroses and the formation of character.⁷

To all this it may be replied that the theories in question abandon none of the views with which we have long been familiar but merely add to them. I do not think, however, that it is possible simply to add to the body of our knowledge without altering it in any respect. It is never simply a question of displacement of accent: there are also displacements in the structure itself. When Freud added the infantile factors in the genesis of illness to those accidental factors with which the old psychiatry was familiar, or when to our knowledge of conscious psychic processes he added the notion of those which are unconscious, it was not a question of a mere addition, which left unchanged all that had been before. We take a different view of the accidental causes of illness if and when we recognize their infantile antecedents.

The above seem to me the common characteristics of the scientific writings we are considering, though they may differ from one another on this or that particular point. And because they have so much in common I think it is legitimate and imperative to study all these works together.

In this paper I propose to discuss a number of questions raised by these theories. I should like to say in advance that I have no controversial intention. Controversy would be particularly unprofitable since my standpoint in regard to them is that of an outsider and my only means of forming an opinion about the experience on which they are based is the study of the works published and the comparison of them with my own experience or that of other analysts. Moreover, I am not in a position to enter into controversy, for I do not know what point of view the authors in question adopt with regard to all the problems upon which I shall touch. Probably their standpoint would be similar in many instances to that which I shall advocate. In other instances this may not be so but, since I do not know where there is a difference of opinion about the points I shall discuss, it is, if only for that reason, out of the question to discuss them in a controversial

⁷ Compare in this connection the study of these 'higher' ego-elaborations contained in Anna Freud's recent work (1936), *The Ego and the Mechanisms of Defence*, Hogarth Press, 1937. By 'higher' ego-elaborations we must understand those which do not or at least do not necessarily occur in the first two years of life.

spirit, except in a few isolated cases. The purpose of this paper is much more modest. It is to enumerate and invite discussion of the questions which in my view have been rendered acute by the formulation of these theories and so to contribute something to future study or discussion of them.

It is doubtful whether an essay so circumscribed can really be called a scientific work at all. The purpose of scientific works is, first, to make public discoveries which the author has made or theories which he has evolved; secondly, to present conclusions arrived at by others; and, thirdly, to criticize and refute the views of other writers. I can lay claim to none of these three intentions. The attempt to envisage the problems raised by a particular theory and to make a kind of catalogue of questions for future discussion deserves the more modest title of an appendix to scientific work.

I

Sources of our knowledge of processes occurring during the first year of life

In every theory about the processes occurring early in life the principal question is that of the means of our knowledge: how do we know anything at all about psychic processes, how can we discover anything about them, how can we corroborate our conjectures? Of course this question always arises and applies to the experiences of any other period of life and we know that it is upon this that one of the arguments against psycho-analysis in general is based. Many of our opponents deny that we have any right to speak of unconscious processes. So the question as to the sources of our knowledge of the psychic processes might be formulated in the widest possible terms. But I think that there is no necessity to raise so comprehensive a problem here. For the purposes of this study we can be quite happy in taking as our starting-point the fact that we are all agreed as to the sources of our knowledge of psychic processes in later life. In so far as this question has any bearing on our subject it will be discussed when we are considering the criteria of interpretation.

Accordingly we will confine ourselves to the only question which can still seem problematical to analysts, namely, what are the sources of our knowledge of psychic processes occurring at an age when the child as yet cannot speak and to which, as it seems, memory cannot go back in later years.

There are two principal methods of discovering the psychic processes of an individual whom we are studying. One is direct observa-

tion at the time when the processes are occurring, the other is analysis at a later period. If we use the second method we have, again, two means at our disposal: the memory of the analysand and reconstruction by analyst and patient. Direct observation, memory, reconstruction⁸—these are the methods which have thrown light on infantile processes occurring at a somewhat later age, say, from the third to the fifth year of life. Let us now see what can be done by these methods when we come to the study of the first year.

In the first place, with regard to direct observation we may say that we have far more data at our disposal when the child is somewhat older. When we observe a three-year-old child, we can examine not only his behaviour but also what he says. Moreover, the behaviour of a three-year-old child is highly complex and consists not merely of expressional movements indicating instinctual impulses and the like, but of very complicated activities. In the case of children in their first year verbal communication is entirely lacking. We can only observe their behaviour and this is confined to a very small number of manifestations, of the nature of expressional movements or—and this not directly after birth but somewhat later—declarations and demands. There are no more complicated activities. So when we study the first year, we can only directly observe the child's behaviour, and his modes of behaviour are very limited. One would

⁸ The term *reconstruction* is not used here to denote simply that which is commonly understood by it in ordinary analytical phraseology. I mean by it any construction of the past which is not simply memory in the individual in question. We have the same sort of thing in judicial proceedings, when everything which is not admitted by the accused or vouched for by witnesses is called circumstantial evidence. The material for reconstruction varies. Sometimes different pieces of analytical material are used. This is what analysts generally mean when they use the term 'reconstruction'. In other cases the past is inferred from *repetition*, from *acting out* (in the transference) alone. If we wish to be exact we must discriminate between these cases. We have included the latter under the heading of 'reconstruction' for the following reasons. If we describe something as a piece of repetitive acting we have already formed a theory about it, for without a theory we could merely state that the patient was *behaving* in a particular way. The fact that this behaviour is a repetition requires to be proved. Thus, acting out is not in itself evidence of the past experiences which we infer from it. If, from the acting out, i.e. from a certain type of behaviour, we retrospectively construct past experiences, this amounts in my view to a kind of reconstruction.

be inclined to suppose that from the observation of behaviour we can infer only relatively few and simple psychic processes in the infantile organism and that other, more complicated processes either do not occur or, if they do occur, do not betray themselves in behaviour and cannot be detected, at any rate by this kind of observation. I think it is, to say the least, an open question if the possibility exists of deducing with any sufficient degree of probability a large number of complicated psychic processes from the behaviour of young infants, behaviour with which we are very familiar, much of which has been examined and catalogued by academic as well as by analytical psychology.

Let us consider in particular the manifestations of oral-sadistic impulses. What the study of behaviour teaches us in this respect is at most the nature of the affect and the goal and object of the instinct. For example, it may make it plain that the child is experiencing rage and manifesting a desire to bite, which is directed towards a particular object, or a desire to incorporate, which is sadistic in character. But apart from the simple inference as to his instinctual and affective situation we learn nothing: we have no evidence in his behaviour of any phantasy. For instance, Melanie Klein speaks of the phantasy of the father's penis in the mother's body and of the tendency to destroy and incorporate the contents of that body. This is a phantasy which we know occurs from what the child tells us himself at a later period, probably when he is about three years old, but, so far as observation of behaviour is concerned, I do not see how it can possibly prove that this phantasy exists during the child's first year, seeing that his behaviour is confined to gestures.

Here is a second point in this connection. Oral-sadistic manifestations do not occur with the same intensity in all children during their first year. There are children who, when they experience oral frustration, will cry for hours at a time, and burst into shrieks of rage, and at Infant Welfare Clinics, where the feeding of the infants is strictly regulated, one comes across babies who scratch their faces with their nails till they bleed. But this is not true of all children. There are some who, when the initial difficulties have been overcome in the first four to eight weeks, never or very rarely scream, and in whom no paroxysms of rage in their very early days are observable, the first manifestations of rage appearing at the end of the first year, and who give the impression of a happy childhood with a strong positive libidinal attachment to those who look after them. It is true

that we ascribe aggressive impulses to all children in whatever circumstances, and we have reason to do so.⁹ But it seems to me a mistake to treat these facts as indicating a mere difference in the intensity of the aggression and ignore them ; there comes a point when quantity is transformed into quality. It may well be true that nobody, not even the richest person, can gratify all his material desires, but the recognition of this fact does not carry us much further when we come to the social problem, the difference between rich and poor. At all events a theory which assumes that in all children there is a great wealth of oral-sadistic impulse and phantasies in earliest infancy has to be squared with the fact that manifestations of oral sadism in the behaviour of infants vary hardly less¹⁰ than does the degree of material prosperity enjoyed by different individuals in the present state of our civilization.

At the present moment I do not see how this phenomenon can be satisfactorily explained by a theory according to which fully developed

⁹ The mere existence of aggressive impulses is clearly not a sufficient basis for Melanie Klein's theory. This is what she says on the point : ' The idea of an infant of from six to twelve months trying to destroy its mother with every weapon at the disposal of its sadistic tendencies—with its teeth, nails and excreta and with the whole of its body, transformed in imagination into all kinds of dangerous weapons—presents a horrifying, not to say unbelievable, picture to our minds. And it is difficult, as I know from my own experience, to bring oneself to recognize that such an abhorrent idea answers to the truth. But the abundance, force and multiplicity of the imaginary cruelties which accompany these cravings are displayed before our eyes in early analyses so clearly and forcibly that they leave no room for doubt ' (*loc. cit.*, pp. 187-8).

¹⁰ In my view, if we leave out of account possible cases of a constitutional disposition to excessive aggression, we meet with violent manifestations of aggression in children only when there are exceptional conditions in their environment. For instance, they may be subjected to a strict régime with regard to their food (it does not take much to make a régime strict) or there may be an absence of calm in their surroundings ; the people who bring them up may indulge their aggressive impulses or a child may suffer from some painful bodily illness or from a mother's ambivalence where there should be love, or his training in cleanliness may be premature and so forth. If there are no such injurious external influences, I think that early manifestations of aggression can largely be avoided or at least so limited that they do not pass beyond the line which separates the normal from the pathogenic.

oral sadism is universal in infants during their first year. We know that the very authors whom I have quoted expressly emphasize the fact that the oral-sadistic reactions of children are reactions to oral frustration, and further, as I need hardly mention, to peace or unrest in their environment, or to aggressiveness in those responsible for their upbringing, and so forth. It follows, too, that the strictness or laxity of a child's dietary régime has a considerable effect upon his aggressive impulses. We cannot help wondering whether possibly all the children whom these investigators studied happened to have been brought up in a particular way, for the methods of training infants vary according to their nationality, social position, etc. Is it not possible that the children in question had been subjected to a strict régime, applied or recommended by the exponents of the modern theories of child-hygiene, who are concerned only with the infant's physical well-being? We are loth to entertain the idea that a theory of general application can have been partly determined by what is really a chance selection of material and we will dismiss this possibility. But an impression remains that the material provided by reality itself may have happened to be of a particular kind and this may have helped to disguise the difference of intensity in the maxima and minima of infantile aggression.

Let us now consider the other two ways in which we may learn something of the experiences of earliest infancy. First let us take memory. One source of our knowledge of such early processes is the memories which emerge in analysis when amnesia has been dispelled. Here we are using the word *memory* in its strict sense to denote the reappearance of a fragment of the past in the shape of the knowledge that such and such a thing did once happen and that the subject experienced it. There are other ways in which the past may return when it has persisted in the patient's mind, but, though these certainly belong to the mnemonic function, I think they are better described by another name. Now we find ourselves confronted with a grave difficulty when we are dealing with the very earliest period of life, when the infant is as yet incapable of speech. Our impression is that the earliest recollections which human beings retain or which emerge in analysis go back to the second year. At any rate I know of no case in which it was possible to *prove* that an individual consciously remembered what happened in his first year, though I know of many instances of ostensible memories which were discovered to be phantasies produced at a later period. We must of course guard against being overhasty and

giving to a negative pronouncement the value of a general law, and we shall bear in mind the objection that it does not follow that what has not yet been proved never can be proved. Since the difficulty of recovering memories becomes increasingly great and the number of those recovered more and more meagre the further back we go in life, one may think that in principle there is no limit to the capacity for memory.

Thus we shall hesitate to conclude that there is an inherent impossibility about any particular phenomenon because, so far, we lack material to prove it. I think, however, that a certain theoretical consideration is in place here.

There is a good reason for expecting that it will be quite impossible to recover conscious memories (in the sense in which we have used the term) of the very earliest period of life. When we remember an occurrence and know that it took place in the past, we direct our thoughts to it as an object of experience and it is natural to suppose that only those experiences can be really remembered at a later date which, at the time when they occurred, were viewed by the subject at a certain distance with 'intentional' reference to them as objects. At the moment when we had a particular experience we must, as it were, have stood at a distance from it, have objectified it, if we are to be able later to make it the object of conscious memory. No doubt everything which was not so experienced remains imprinted upon the psyche and continues to live and exert an influence, but in this case the mnemic function acts in a more primitive way: it cannot precisely be called memory. It helps to determine the subsequent life of the individual and the affect associated with it may be reproduced, or it may give rise to mental images, but it is not remembered. It seems that we have come back to the old distinction, long current in analysis, between acting over and remembering.¹¹

Now the power to objectify experience is apparently not present from the beginning: it is rather the result of development. We are probably right in assuming that children arrive at this stage at the end of their first or the beginning of their second year. We shall come back to this point later, when we discuss the problem of super-ego

¹¹ This idea has been ably formulated by Max Scheler, no doubt under the influence of psycho-analysis (*Die Stellung des Menschen im Kosmos*, Darmstadt, 1927). He discriminates between tradition and memory and says that in the case of the former the past persists in the present, while, in the case of the latter, an experience is as it were thrown back by memory into the past to which it properly belongs.

formation, and for the moment we will content ourselves with recognizing that the beginnings of the capacity for speech (or, more correctly, of the representational function of speech) probably indicate that the child has reached that stage of experience which is a necessary condition of memory at a later date.

We believe that everything which is experienced earlier continues to exert an influence but that it cannot be the object of conscious memory. Perhaps the very reason why impressions received during this earliest period have such a particularly strong effect is that they lose nothing of their force through being remembered—they cannot be apprehended as having no present existence or be thrown back into the past; we must, I think, entirely agree with Joan Riviere when she says that the circumstance that a baby cannot express feelings in any way that we can understand 'may be one of the major causes of its special sensitivity to these earliest experiences and their especially significant after-effects'. But this does not alter the fact that these theoretical considerations serve to corroborate our view that the lack of memories which can definitely be proved to go back to the first year of life is not simply accidental but rather inevitable and determined by the ego-development of the child. If this is so, however, we cannot hope to corroborate theories about processes occurring in the first year of life by means of memories produced by individuals.

It may be objected that these are theoretical assumptions which themselves have not been proved and therefore cannot be adduced in support of the assertion that there is a limit below which memory, properly so-called, cannot reach; these considerations, however, are not the only ones to be taken into account. There are others, commonly accepted by psycho-analysts, which bear them out. When we say that a capacity to stand at a certain distance from a particular experience and transcend it potentially is a necessary condition of the power subsequently to objectify it in memory, we are of course not asserting that this capacity makes its appearance suddenly, when the infant begins to speak, and exists from that moment in its final and fully developed form. We are sure that it is slowly evolved, like the faculty of speech itself. If, as we assume, the complete absence of the capacity to objectify at the very beginning of life constitutes a fundamental limitation for later memory, it cannot but be that the still imperfect development of this capacity at a later age is a quantitative if not an insuperable difficulty in the way of subsequent memory. Here we are once more on familiar ground. Freud said of

the pre-Œdipal phase that all the experiences of that past era seem 'hoary with age and shadowy',¹² and other analysts have gone on to conjecture that human memory goes back to the time before the Œdipus period only seldom and with difficulty. It is a fact that the vast majority of the memories of childhood belong to the period characterized by the castration and Œdipus conflicts. There is a simple explanation of this phenomenon, on the lines of what has just been said. Speaking of the development from matriarchy to patriarchy, Freud said that it signified a mental advance, for reliance was now placed on inference and thought, instead of on the testimony of the senses.¹³ Thus it was a step parallel to an advance in ego-development, towards release from an immediate dependence on the instinctual needs of the moment and on the actual perceptual situation. We may suppose that the same applies to the advance from the pre-Œdipal mother-fixation to the patriarchy of the Œdipus complex. The paucity of memories of the pre-Œdipal period may thus be similarly explained by the imperfect development of the ego at that period, just as the complete absence of memories of the first year is explained by the non-existence of the ego-function in question.

It seems then that we have good grounds for thinking that conscious memory of the very earliest period of life is fundamentally impossible and that the few examples which we should be inclined to regard as such memories really belong to a later period and have their source in what the individual has been told.

At this point it may be objected that it is no great loss even if true memory is lacking: memories are not a pure source of knowledge and we know how frequently they are deceptive. This is quite true and nobody will imagine that every memory has the value of proved material. Analysts, of all people, are constantly occupied in discovering the elaborations and distortions which have taken place in people's memories. But this imperfection in the material does not prove that it is worthless, any more than the fact that spurious fabrications are made where excavations are being carried out proves that archæology is of no value. Perception too is liable to error and yet science cannot do without it. We are tempted here to quote the anecdote of a man's remark about women, told by Freud in connection with the question of medical training for psycho-analysts: speaking of women, a man

¹² 'Female Sexuality', this JOURNAL, Vol. XIII, p. 282.

¹³ 'Notes on a Case of Obsessional Neurosis', *Collected Papers*, Vol. III, p. 368 (footnote).

once said, 'After all, a woman is the best thing of *the kind* that we have.'¹⁴

Another objection might run thus: Even if we have no memories going back to the first year, we have other mnemonic products, for these experiences continue to exert a living influence and to be reproduced, whether in the re-emergence of visual images or in that of affects in the transference-situation under analysis. This cannot be disputed, but it really comes under our next heading: reconstruction from analytical data.

In this connection we can only make certain general statements, which are sure of general acceptance. Nobody doubts that in reconstruction the greatest caution must be exercised, the greater in proportion to the degree of discrepancy between the scope and the details of the processes reconstructed and the proved data at our disposal. A single instance from analytical writings will suffice. In 'The History of an Infantile Neurosis' how exhaustively Freud discusses the question of whether his reconstruction of the patient's observation of coitus when in his second year corresponded to a reality. And yet this same experience was on the whole very probable, and certainly by far the majority of children have witnessed such a scene in very early infancy either in consequence of restricted house-room or through the carelessness of the parents. We know that, after all, Freud could come to no definite conclusion and finally left it an open question whether what the child really witnessed was the sexual act performed by animals and not by his parents; for, since he grew up in the country, he had ample opportunity of observing the latter.

We can hardly escape the impression that the attempt to get at experiences of the first year must encounter very considerable difficulties and that theories about a rich phantasy-life in this period are harder to verify than statements about what occurred at a later age. It might be retorted that, because of these difficulties, it is not fair to demand from those who have investigated this period of life proofs of the same degree of cogency as those which psycho-analysis has at its command where its conclusions about later periods are concerned. But we soon realize that this is no argument for, to quote Freud again, 'Ignorance is ignorance; no right to believe anything can derive from it.'¹⁵

¹⁴ Postscript to 'Die Frage der Laienanalyse', *Ges. Schriften*, XI, S. 385.

¹⁵ *The Future of an Illusion*, p. 56.

Of course we can try to find a substitute for material which is lacking and, arguing that the psychic processes in very early infancy must still bear a strong resemblance to biological processes, we may look for that substitute in biology.¹⁶ But so far it has not been found there.

Naturally, nothing in what has been said constitutes an argument against the validity of the theories put forward by Melanie Klein or other analysts with regard to the earliest period of life ; but I think it is now evident that these theories cannot be said to be so convincingly attested as the other components of psycho-analysis.

II

*Criteria of interpretation*¹⁷

When we study the writings I have quoted, we often come across certain phrases which are also quite usual in other analytical works as well. We read that 'analysis showed' this or that, or that it led to such and such a conclusion, and so forth. Phrases of this sort are calculated to put an end to any further discussion. If we cannot agree with the author at this point, we must be on our guard lest we should be thought to be casting doubt on the material itself instead of questioning the soundness of his conclusions ; and we shall be liable to come under suspicion of being prevented by something in ourselves from finding those conclusions as obvious as he does.

Of course, as I have already said, this phraseology is not peculiar to the writers in question but is to be met with in psycho-analytical works in general. It is impossible for an author in every instance to adduce the analytical material upon which his conclusions are based, consisting as it does of innumerable details. Nor is it necessary for him to do so, for, apart from a few productions addressed to non-analytical readers, analytic works are written for analysts and it is presumed that every analytical reader will be able to supply from the experience which he himself has accumulated that which is not fully described or expressly stated.

But the case before us is clearly one in which the views of a number

¹⁶ Of course, by *biology* we understand here not merely the science of physiology and kindred researches, but biology in its more recent and comprehensive aspect, the aim of which is to investigate the vital processes in general.

¹⁷ Cf. Bernfeld, 'Der Begriff der Deutung in der Psychoanalyse', *Zeitschrift für angewandte Psychologie*, 1932, XLII; and H. Hartmann, *Grundlagen der Psychoanalyse*, Leipzig, 1927.

of analytical investigators do not seem to their colleagues in the same field to be fully established, and therefore we sometimes feel that we cannot be satisfied with the bare statement that the analysis shewed this or that, but that we should like to know exactly what the facts were in every detail, and what were conclusions drawn from them, and precisely why these conclusions were drawn and not others. I do not think that it is enough to quote the obvious analogy between the hesitation felt by many analysts in accepting particular analytical theories and the doubts experienced by those outside analysis with reference to the conclusions of analysis in general. In particular, it seems to me unprofitable to deflect the discussion of an objective question to that of the possible emotional bias of the sceptic. For psychology is a two-edged weapon, as Freud pointed out when he said that 'the polemical use of analysis can obviously lead to no decision'.¹⁸ Psychology has always a twofold application. Moreover, the general resistance to the conclusions of analysis which we all know to be the affective basis of its rejection by the world in general has never been used as an argument for their validity. On the contrary, it was not till after this seemed to have been abundantly proved that Freud asked himself the question why these conclusions had not long ago become common property, and still met with rejection even after his discoveries. The logical outcome of discrediting any doubts which may be expressed with regard to the findings of an analyst would be to assert that every analytical interpretation must be correct—a conclusion which can hardly be admitted.

In a word, the question of the criteria of interpretation, which is of itself exceedingly interesting, becomes acute when we have interpretations which do not appear convincing to all analysts in the light of their own experience. So long as those engaged in analysis were to all intents and purposes in agreement, the discussion of the question of criteria could be deferred, but when wide divergences of opinion become apparent it is time for it to find a place on our programme.

It is not my intention to enter here upon the whole problem of the criteria of interpretation; it would take us altogether too far outside the scope of this essay. We are confining ourselves to the points raised by certain controversial theories and there is therefore no need for us to discuss points which are not in question amongst analysts themselves.

¹⁸ Freud, 'Female Sexuality', *loc. cit.*, p. 285.

Let us ask first what are our criteria in those fields of psychoanalysis in which there is no controversy.

Here it is advisable to distinguish between two types of interpretation. The first is that which relates to the present life of the analysand, the unconscious processes which are at work in him *hic et nunc*, and the second that which is arrived at by a reconstruction of the past. It is evident that the criteria of interpretation are not quite the same in the two cases.

In interpreting current unconscious processes, no matter whether they belong to the sphere of instinct or to that of ego-elaboration, we look for some direct confirmation. The unconscious processes enter consciousness, sometimes immediately and sometimes only later, and the patient admits that they actually are taking place or have taken place in him. Generally such interpretations are followed by associations which indicate the operation of these unconscious processes in other connections. In some cases this does not happen, but the interpretation may all the same have been correct. If it was correct, it always makes it possible for us to understand and interpret the other type of reaction in the patient, namely, his resistance. What I said above applies to the interpretation of resistance as well: the patient becomes conscious of his resistance. Once the interpretation of it has been worked through, the way is clear for the other interpretations to enter consciousness or to be supplemented by fresh associations.¹⁹

The situation is more difficult in interpretations relating to the past. Here the patient's memories as they emerge often take the place of his conscious confirmation of our interpretation of his present experiences. And some of the memories which follow are analogous to the associations which, in the first case, indicate the operation in other connections of the instinctual impulses or methods of ego-behaviour which we have inferred. But this evidence is not always equally convincing. Memories are always open to the suspicion of error and of having been produced by the patient from a desire to please and so forth.²⁰

¹⁹ It is not necessary for the purpose of this study to discuss the technical problem of interpretation or certain grave pathological cases in which this formula does not exactly apply.

²⁰ It might be said that the same thing may happen when we are interpreting current processes: the patient's admission that he detects in himself certain impulses may be mistaken or prompted by a desire to please, etc, that is to say, it may be the result of suggestion on the part of

There are various other possible ways of obtaining corroboration. In some cases a third party, possibly a relative of the patient, corroborates the fact that certain incidents happened which we have inferred in our interpretation. For technical reasons we usually refrain from using this method, but the fact remains that an interpretation can be, and in many cases has been, verified in this way. Or the patient's own store of memories furnishes corroboration of incidents which we have merely inferred to have happened.

But the final proof of the results arrived at by psycho-analytical interpretation lies outside analysis, in the direct observation of children. Of course, it is not possible to use this method to verify an interpretation in an individual case, for we cannot transport the patient back into his childhood and observe what he actually did. Certain fundamental facts, however, *can* be verified by direct observation of children, as, for instance, the existence of the Œdipus conflict and the castration-complex. These were originally arrived at by a process of interpretation in the analysis of adults: it was inferred that they had occurred in the patient's childhood. But the final proof lies in the fact that direct observation provides evidence of all these processes. The results of observation in this case are extraordinarily definite. We have only to allow children to express themselves fearlessly and we shall observe beyond any possibility of doubt all these tendencies and anxieties. It would probably be quite right to say that the evidence of these infantile processes could be presented in a talking film.²¹

the analyst. If we were giving an account of the criteria of interpretation for the benefit of non-analysts we should have to consider this objection fully, but for the purposes of this paper it may be disregarded; we know that suggestion has no place in analysis and that it would argue peculiar lack of skill on the part of an analyst if he did not realize that certain associations were being produced from a desire to please and proceed to analyse the motive for them. It is evident that the possibilities of deception are greater in the case of the analysand's confirmation of interpretations relating to the past than in the case of that which relates to processes actually in operation.

²¹ I must take leave to dispute one passage in Joan Riviere's paper. On p. 397 we read: 'Even the most important part of the Œdipus complex, the gross sexual and aggressive impulses and phantasies, would hardly be regarded as proved or its existence as definitely established by extra-analytical observation alone.' I think that the evidence is as convincing here as evidence can ever be when it relates to what goes on in the mind of another. If we fail to realize the large body of evidence for such psycho-

Now it is true that this in itself is still no proof of the validity of interpretations relating to individual variations in individual cases. But this extra-analytical evidence does establish the following points : (1) that certain processes occur regularly and are never absent, (2) that individual variations exist and, moreover, that direct observation provides evidence that such variations give rise later to precisely those products which we discover when analysing persons in whose infantile history, according to our interpretation, these variations played a part. Thus, for instance, the analysis of certain neurotic symptoms and character-traits in female patients leads us to infer an elaboration of the castration-complex. For example, a certain type of object-relation may represent an active castration-tendency which has its source in penis-envy. The corroboration furnished by the direct observation of children is that we find that little girls who elaborate the fact of the difference between the sexes in this particular way go on to develop this particular type of object-relation.

This brings us back to the observation of behaviour as the final means of verifying analytical interpretation. It is evident that it is no small loss if we must do without corroboration through direct observation.

A more comprehensive view of the matter may throw light on all this. We often find that writers suggest that a theory must be correct because its various elements agree with one another and bear one another out.²² Let us consider whether the consistency of all the

analytical conclusions and are inclined to think that these conclusions are based solely on considerations of plausibility and on such experiences on the part of the analyst as bear them out, we shall very likely go on to suppose this kind of corroboration would suffice in the case of analytical propositions in general, and that anyone who required more in the way of proof would be making a demand with which psycho-analysis does not and need not comply. This is to fail to appreciate the great gulf between the more convincing evidence which is required and forthcoming for our psycho-analytical theory and the much more uncertain basis for hypotheses concerning processes occurring during the first year of life.

²² It might be contended that Freud makes use of a similar argument to justify the technique of dream-interpretation. Cf., *The Interpretation of Dreams* (Revised Translation, 1932, p. 487.) 'If such objections are really put forward, we may in defence appeal to the impression made by our dream-interpretations, the surprising connections with other dream-elements which emerge when we are pursuing the individual ideas and

various elements is really a criterion of the correctness of the whole system.

One thing, however, is certain : the lack of such inner agreement, an inconsistency in the separate parts of a theory, is a strong argument against it. Either it is incorrect as a whole or parts of it need to be revised. Thus consistency is certainly a necessary condition for the correctness of a theory but it is doubtful whether consistency alone

the improbability that anything which so perfectly covers and explains the dream as do our interpretations could be achieved otherwise than by following up psychic connections previously established But the 'astonishing agreement with other dream-elements' is not taken by Freud to constitute a proof : he merely cites it by way of illustration of the 'impression' produced by our dream-interpretations and he points out that often, when the analyst is pursuing one dream-element, other elements are illumined in a surprising way. When he speaks of the 'improbability' that any explanation which so completely covers and elucidates a dream can be arrived at in any other way than by following up psychic connections previously established, he means that it is improbable that an explanation which comprises a large number of phenomena in a single whole can be based on chance. In a paper entitled 'Die Psychoanalyse Freuds, Verteidigung und kritische Bemerkungen', Bleuler endeavours to estimate this probability. But Freud does not regard this as the real proof of the validity of our technique of interpretation. And the next argument which he uses in the passage I have quoted—the identity 'of the procedure used in dream-interpretation with that used in resolving hysterical symptoms, when the correctness of the method is attested by the emergence and disappearance of the various symptoms, each in its place'—is again not accepted by him as a completely satisfactory proof. Such a proof he seeks and finds only when discussing the problem of free association. There are many other criteria of the validity of psycho-analytical dream-interpretation. For instance, forgotten dream-fragments frequently re-emerge after one fragment has been interpreted ; buried experiences of childhood are revealed as the result of an interpretation ; the inference drawn is confirmed by the patient's present state or by his direct assent ; or an interpretation enables us rightly to diagnose physical or psychic processes active at the moment (e.g. pregnancy in a patient who had not yet realized her condition, or some symptom such as agoraphobia which has not yet been confided to the analyst) or to predict what will happen later (e.g. when a dream reveals that a negative transference is emerging or that the patient has an inclination, which will only manifest itself after some time, to give up analysis). Cf. in this connection H. Hartmann's *Grundlagen der Psychoanalyse*, Leipzig, 1927.

suffices to prove it. To frame the question in this way is to answer it in the negative. Even quite erroneous theories often seem to provide the explanation of a whole series of phenomena. To give an extreme example: paranoiacs often feel that every detail in their daily life confirms their beliefs, and they argue that these beliefs alone contain the key to everything that they experience. Interpretations cannot be used to prove one another; they must be corroborated, at least in some one point, *extra-systematically*, by something which is not itself interpretation.

This is very unsatisfactorily expressed because it leaves out of account the fact that the evidence upon which a system of interpretations can be based and which is not itself interpretation yet does contain elements of interpretation. (For instance, our direct observation of children—like any other observation of children—naturally contains such elements.) But some interpretations approximate less closely and others more closely to that which is verifiable intersubjectively. We might arrange interpretations in gradation and say that all those of the n th grade must be corroborated by at least one interpretation of the grade $n - 1$, so that ultimately the proof lies in that which is intersubjectively verifiable. Such a theory of gradation is very likely correct, but for our present purpose we may content ourselves with observing that the agreement of all interpretations is not of itself a sufficient basis for a theory but must be reinforced, at least in one point, *extra-systematically* by proved facts.

I think that this notion is applicable to the confirmation, through the direct observation of children, of the occurrence of infantile processes arrived at by interpretation in the analysis of adults.

It is hardly necessary to mention that yet another criterion, the criterion *ex juvantibus*, cannot legitimately be adduced here. Indeed it seems to me a proof of the high level of all psycho-analytical discussion that the various parties consistently refrain from using this argument. A cure can often be effected by more than one method. The question is what is meant by cure. On this point analysts have long taken up a very different position from that adopted by clinical psychiatry and the other methods of psychotherapy, whose practitioners speak of cure when certain symptoms known to them have disappeared. But psychotherapists as a rule do not and cannot know all the patient's symptoms and they do not stop to consider the price paid for the removal of a symptom. The same difficulties in regard to the problems of cure occur in analysis, though in an infinitely more

subtle form. So it is a very good thing that we do not rely on this argument.

Perhaps to conclude this section we may take a general survey of the methods of verification that analysis may employ.

The fundamental difficulty is that human individuals are not suitable subjects for experimentation. By 'experimentation' we mean the variation at will of a single condition while all the others are kept constant, and it assumes that there is only a limited number of conditions and that these can be varied or kept constant at will. Thus experiment in the strict sense of the term can take place only in the sphere of phenomena we can control, i.e. inanimate objects. Life eludes experimentation in this strict sense; for life is an historic process. If we vary one condition in two different individuals in different ways, we still have no experiment in the exact sense of the term. The second individual cannot be used as a 'control' for the first, for these two individuals are not identical in every other respect. So we are not justified in immediately attributing the difference of the results obtained in the two to the variation of a particular condition. Supposing, on the other hand, we vary a condition in two successive experiments upon the same individual, we cannot as a rule draw any convincing conclusion, for, when the second experiment takes place, the individual is no longer in the same state as in the first, seeing that he has already been submitted to this. For instance, if we want to know how a child reacts to methods of tenderness or severity in his upbringing and try first the one and then the other, the child who has experienced severity is no longer the same as he was before that experience, and it has not been proved how he would have reacted to indulgence if his desires had not previously been thwarted. Thus the necessary conditions for experiment cannot be obtained in this way.

It is true that these conditions of (ideal) experiment are not strictly applicable even in the case of the natural sciences. Even in physics the number of conditioning factors, all but one of which should be kept constant, is not really limited but infinite, and some of these factors are not within our control. An experiment made in 1900 cannot, to be quite exact, be reproduced in 1936, for not all the previous conditions—for instance, the position of the Milky Way—can be exactly repeated. Strictly speaking, even an experiment in physics is an historical act in a process which cannot be reproduced. But experience has shewn that we are allowed to neglect a sufficiently large number of parameters.

We must not overlook the possibility of obtaining proofs in psychology which are comparable to those obtained by experiment. Experimental biology testifies to such a possibility. The life of the lower animals is also an historical process, though of more limited dimensions than human life, and yet it can be made the subject of experiment.

So although, when human beings are in question, the situation can never be exactly comparable to an experiment in physics, yet experiments or something comparable to them can be undertaken under the following conditions :

(1) on the periphery of personality. Here experiments can really be made, either by taking two individuals and varying a particular condition in the case of one of them or by varying the same condition in one and the same individual in two successive tests. For instance, an experiment with contrasting colours does not alter the behaviour of the subject when he undergoes a second test. This is the basis of a great part of academic psychology ; for analysis, concerned as it is with the central phenomena of personality, this case is of little interest.²³

(2) quasi-experiments conducted with a large number of persons. We have seen why we obtain no convincing proof if we vary a condition in the case of one subject of an experiment and keep it constant in the case of another. The difference in the other qualities of the two individuals is too great for us to be able to ascribe the difference in our results with any certainty to the variation in this single factor. The greater the number of persons experimented with, the more limited is this source of error. If we have a sufficiently large number, we may legitimately draw a general conclusion, for we may expect that the variations will be distributed equally on both sides and cancel one another out.

Under this heading we must place the conclusions arrived at as the result of attempts to exert an influence psychically in accordance with some theoretical system (e.g. methods of education).

This kind of quasi-experiment plays a great part in analysis, when we draw conclusions from a large number of cases. Naturally it is not necessary for a condition to be varied *at will*. The observation of a

²³ Modes of behaviour belonging to the periphery of the personality may in fact be defined as those in which a first experiment does not alter the behaviour of the subject when submitted to a second.

large number of cases in which it varies *by chance* (for instance, in the way the individual has been brought up) answers the same purpose. For example, when we observe how regularly an acute neurosis develops in men who underwent operation for phimosis between their third and seventh year and when we compare these statistics with the far smaller percentage of cases of acute neurosis in other men, we feel it legitimate to draw certain conclusions.

(3) experiments of nature. In many cases nature itself provides the conditions of experiment ; we might say that every abnormality is an experiment of nature. This is why in psycho-analysis investigation of the pathological takes the place of experiment in the natural sciences.

A particularly impressive example of such an experiment of nature is that of uniovular twins, for we may assume that their heredity is identical and that their differences are due to factors in their environment. H. Hartmann shewed that in such twins we may find both aspects of the anal character, one being miserly and the other prodigal, and that this proves the unity of that character.²⁴

(4) experiments in cases in which the living object's freedom is somehow restricted (e.g. in hypnosis or in experiments with post-hypnotic suggestion). Under this heading comes the experimental confirmation of dream-symbolism, obtained by Schrötter, Roffenstein, Betlheim and Hartmann. We have an instance of this kind of experiment in analysis when e.g. we draw an inference as to the nature of the transference-material from transference-phenomena which appear regularly.

This is how we finally arrive at our evidence in analysis, if we have not already received satisfactory corroboration in the direct assent of the patient to our interpretation.

It is time to return to our subject. We have made a wide *détour* and seem to be a long way from it. But all our considerations converge upon a single point, namely, that in my opinion we have not yet sufficient evidence for theories about processes during the first year of life.

All the phantasies which have been described as belonging to this early period have been abundantly proved to occur at a later age, in children of about three years old. I believe that we shall obtain

²⁴ 'Psychiatrische Zwillingsstudien', *Jahrbuch für Psychiatrie und Neurologie*, Bd. L and LI, 1933-4.

evidence that they occur even during the course of the third year. It is, I think, no small merit in the writings which we are considering that they have drawn attention to these phantasies. Their existence is not in question, only their occurrence so early in life. We might be tempted to say that they could not have arisen as late as the third or fourth year but must date back to an earlier period. The obvious argument in support of this view is that these are oral phantasies and we are accustomed to describe the first year as the oral phase. I do not think, however, that this is a sound argument. In the first place, as regards the ascription of oral phantasies to the oral phase, I would point out that orality does not come to an end when the libido takes up the anal position. Freud never intended to assert that a particular libidinal position excluded all others; he was merely describing a certain organization of the libido. In the next place, the classification of libidinal development in several phases was a tentative piece of work, a fine idea because it accounted for the phenomena in question at a single blow, but nevertheless it was a piece of pioneer work, and there are many points in connection with these phases of development which remain obscure for the very reasons I gave when speaking of the obscurity of that 'hoary and shadowy' past. Now when it comes to deciding that phantasies which we encounter must have originated at an earlier period, which is as much as to say that it is an impossibility for them to have arisen at the present time, this argument seems to me no more convincing than it would be to insist that Shakespeare's *Hamlet* or *Lear* must have already existed in his mind in childhood. It is true that the germs of the dramas were there—phantasies to be subsequently elaborated, a particular bent of his genius and much else besides belonged to the poet's early childhood—but the finished product came into existence, only when he reached maturity. Similarly the phantasies²⁵ belonging to the third year may have their antecedents in processes which occur at the very beginning of life and be woven of this early material, combined with the experiences subsequently acquired during the development of the instincts and the ego, and as a result of external happenings. But I see no grounds which compel us to conclude that the phantasies themselves belong to these early periods.

²⁵ The word 'phantasy' is used here in the sense in which it is used in common parlance, whence psycho-analysis adopted it. Experiences which have not been dealt with by thought-processes would be more correctly described as impulses, anxieties, etc.

III

The formation of the super-ego

One of the controversial questions relates, as we know, to the so-called early super-ego. Let us take the opportunity to describe the problem of the formation and development of that institution; some account of it may be useful as a basis for the discussion of differences of opinion.

We know that in *The Ego and the Id* Freud speaks of the formation of the super-ego at the time of the passing of the Œdipus complex. He describes its foundation as the child's identifications with the parents, these being, unlike the so-called 'identifications within the ego', opposed to the rest of the ego. The Œdipus conflict terminates in these identifications, which, in relation to the ego, embody the libidinal and aggressive tendencies of the object on the one hand and, on the other, the subject's own tendencies turned back upon the ego. All this is very familiar, as is Freud's explanation of how it is that the Œdipus complex has precisely this issue. This leads on naturally to the differences between the masculine and the feminine super-ego. In boys the Œdipus complex comes to an end more abruptly and more suddenly than in girls. In the latter it seems rather to die away gradually, the only causes for its destruction in the female sex being privation and dread of the loss of love, while in boys castration-anxiety is another contributing factor. Much later in life men have, as it were, their revenge on the opposite sex. The end of the second sexual phase, the period of maturity, terminates abruptly for women, whereas in men there is a gradual process of decline. These differences in the passing of the Œdipus complex and the formation of the super-ego have been adduced as the explanation of the differences in the super-ego in the two sexes; in men it retains traces of its origin in castration-anxiety and in women of the dread of loss of love. Thus the man's super-ego, it follows, is less dependent on other people's opinion, while the woman's is more akin to social anxiety. The saying attributed to Martin Luther, 'Here stand I, I can no other' (the command of the super-ego which set him in open opposition to the forces of the community) is said to be characteristic of the male super-ego, while such an attitude is not easily conceivable in the case of women.²⁶

²⁶ It is not to be supposed that this attitude is never met with in women, only that it is comparatively rare and that women with a super-ego of this sort probably give us an impression of masculinity.

This theory of the formation of the super-ego during the fifth year has met with a good deal of contradiction. It is contended that it really dates much further back and is established at a very early period. To assume that the super-ego originates when the child is four years old is said to be as mistaken as to suppose that sexuality begins at puberty.

Now the theory of super-ego formation, as I have outlined it, was never intended to suggest that we can perceive nothing comparable to the processes of the super-ego before a child is four years old. What is meant is rather that at this age a psychic institution is formed which contains within itself a consistent code of laws and divides the world into good and bad, and that the behaviour of the child from that time on is decisively different from what it was before. This difference between children's behaviour in their fourth and in their sixth year is clearly noticeable in their upbringing. Anna Freud has described this change as follows : ²⁷

'When the child enters on this phase, the life of those responsible for his upbringing becomes easier. Hitherto they have been struggling with a being totally opposed to them, who always wanted what they did not. Now, we may confidently assert, they have an ally in the enemy's camp. Those who have to deal with older children can always safely rely on this super-ego and say, "We two are in league against the child". And the child sees itself confronted by two powers : the transformed part of its own personality and the love-object which still exists in the outside world. He becomes docile to a degree hitherto quite unknown.'

The change which takes place in the child at the end of the first sexual period is familiar to educationists. The practice, common amongst civilized races, of sending children to school from about the sixth year is certainly not accidental. It is determined not only by their intellectual development but by what Freud describes as the development of the super-ego, for they are now able to grasp the idea of duty. Probably it was for the same reason that in the Middle Ages children were removed from the sole care of women and entered their father's sphere of interest on reaching this age.

There can be no doubt that, round about this time, revolutionary

²⁷ Anna Freud, 'Die Erziehung des Kleinkindes vom psychoanalytischen Standpunkt', *Zeitschrift für psychoanalytische Pädagogik*, Bd. VIII, 1934, S. 24 f.

processes occur in the domain which we assign to the super-ego. But this does not mean and was never supposed to mean that even earlier, right back to the second year, there were no phenomena similar to the super-ego, such as, for instance, a sense of guilt. The existence of such phenomena is commonly admitted by psycho-analytical writers and has been discussed by them in the literature since Freud's *The Ego and the Id* directed attention to the problems connected with the super-ego. It is true that it has been customary to speak of 'antecedent phases' of the super-ego.²⁸ Let us for a moment disregard the question whether 'antecedent phases' is a suitable term for these phenomena. At all events we believe that a sense of guilt and remorse already manifest themselves at a much earlier age. Naturally in the case of a two-year-old child it is very difficult to distinguish between dread of an external object and a sense of guilt. Only too often we have the impression that no guilt is felt unless the external object whom the child fears knows of the transgression or—since to a child all adults are omniscient—is believed to know of it. It seems then that the guilty feelings lack one of the distinguishing marks of the super-ego, namely, its capacity to operate independently of the presence of a dreaded external object. Yet, in spite of all and even when we take into account everything which can possibly be a manifestation of anxiety,²⁹ there remains something which argues the existence of an inner voice.

²⁸ Cf. O. Fenichel, 'Die Identifizierung', *Internationale Zeitschrift für Psychoanalyse*, Bd. XII, 1926, S. 321 ff.

²⁹ There is another difficulty which must be mentioned in this connection. The writers whose works we are considering often speak of an 'introjected object' and the fact that this object has not the characteristics of the real object but those with which the child's phantasy endows it is held to prove that it is not a real object but an internalized object. I would suggest that we should differentiate between two things: *an inner institution* and *an idea of an external object*. Such an idea may not coincide with the reality: the object may be distorted in phantasy by the addition of characteristics which have their source in the mind of the subject. But still this is not the same thing as an introjected object. There is a difference between a patient's rejecting a certain mode of behaviour at the bidding of an inner voice and refraining from it from fear of another person—however unreal this person may be and however little the characteristics with which he is endowed in the patient's imagination correspond to the reality. There are various criteria by

We know of two sources for these phenomena. One is the child's identification of himself with the people who bring him up and the other derives from the course taken in him by the conflict of ambivalence and from the limitations imposed on his aggression by the outside world. In the first case he identifies himself with adults, just as he does later at the passing of the Oedipus complex; he makes their commands and prohibitions his own and we may say that they are introjected. This is a fact which can hardly be questioned. We notice that children towards the end of their second year will put on a deep voice when quoting the commands of their elders. Melanie Klein gives a very good illustration of this sort of thing.

When considering the genesis of the phenomena of conscience from the conflict of ambivalence and the external restraints upon aggression we must distinguish between two things: the libidinal and the aggressive roots of these phenomena. In the one case it is the child's aggression which meets with an external check or is restrained by his own love-tendency and recoils on himself. For instance, it has often been observed that a child who is prevented from hitting another child will hit himself. This turning-back of the aggressive impulse upon the self may even give rise to behaviour suggestive of a need for punishment.

If, however, an aggressive impulse has actually been carried out and the object has suffered an injury, the tendency to make reparation comes into play in consequence of the ambivalence in the object-relation. The aggressive impulse has been satisfied and appeased by the act and its intensity diminishes: love once more makes itself heard and seeks to restore the object which has been injured. This is the account which Freud gives of the origin of remorse.³⁰ Of all the

which we may test this difference. I will mention only one: a neurosis apparently develops differently according as it is based on a true sense of guilt or on dread of an imaginary avenger; the methods adopted to deal with the pressure of an inner institution or the dread of a phantasied object are not the same. In the second case the patient often resorts to modes of defence designed to appease, deceive or outwit the imaginary antagonist. Such attempts are not so practicable when a true inner institution is in question.

³⁰ Freud, *Civilization and its Discontents*. H. Nunberg draws attention to the libidinal components in the sense of guilt in 'The Sense of Guilt and the Need for Punishment,' this JOURNAL, Vol. VII, p. 420.

early phenomena of the type we have been discussing remorse is probably the earliest.

Psycho-analytical writers commonly describe all these impulses as antecedent phases of the super-ego [*Vorstufen*]. They closely resemble the super-ego proper. We can trace them as early as the second year. Why are they called antecedent phases? Fenichel says on this point: 'All these early forms are characterized by the fact that they are disconnected and independent of one another—much like the component instincts before they are combined in a unified sexual organization. The fundamental characteristics of the super-ego, its unity, its severity, its opposition to the ego, its unconsciousness and its strength—all of which are bequeathed to it by the *Œdipus complex*—are lacking in these antecedent phases.'³¹

I believe that at the present time the majority of analysts hold similar views about these antecedent phases and their difference from the later super-ego proper. We may wonder whether Fenichel's description is not somewhat too precise in this or that point, as, for instance, when he implies that these phases are never opposed to the ego or never unconscious, but on the whole the impression he conveys is that we are here dealing with relatively isolated phenomena, separate internalized commands and prohibitions which have not as yet been welded into a unified code, single and relatively disconnected acts prompted by remorse and the need for punishment.

Questions of terminology ought not to be made a bone of contention but should be cleared out of the way by agreement on a definition. I think that there is no reason why these antecedent phases should not also be called the 'super-ego', if anyone wishes so to call them. But, in order to do justice to the facts, we must then state that that which occurs in the fifth year of life is the decisive step taken in the development of the super-ego and may perhaps be termed its integration. There would be little difference in the result.

Let us now go back yet another step and ask whether we can find anything at an earlier period still which might be included in the concept of the super-ego. I think that we do find something of the sort at the end of the first or the beginning of the second year. I refer to the advance in the child's development when he reaches the point of being able to objectify his own self. This is a stage which we

³¹ O. Fenichel, *loc. cit.*

mentioned before when we were discussing the theoretical question of an ultimate limit to memory. The child now begins to detach himself from the biological situation characterized by vital instinctual needs and from his perceptual environment and develops the capacity to adopt another, imaginary standpoint. When this advance is made, there opens up a wealth of undreamed-of possibilities in the shape of speech and culture. A number of experiments in animal-psychology suggests that it is here that the real difference between human beings and animals lies. The newly acquired capacity manifests itself in many ways, e.g. in the ability to understand an imaginary situation. Some experts in cerebral pathology hold that it is precisely this function which is impaired and partially lost in asymbolic disturbances.

There seems to be good grounds for assigning this function to the super-ego. The power to objectify the self and to achieve detachment from it and the vital needs of the moment probably depends on that formation of different levels within the ego which is the most essential characteristic of the super-ego. We remember that Freud, in his 'Introduction to Narcissism', introduced the concept of the super-ego in connection with the phenomena of the delusion of observation, and again in his most recent account in the *New Introductory Lectures on Psycho-Analysis* he raises the problem in connection with the question how the ego can take itself as an object. Moreover, it is certain that all the phenomena of the super-ego presuppose this function; whether we punish ourselves or comfort ourselves there must be some stratification within the ego, an imaginary standpoint from which we confront the rest of our personality. This was my reason for endeavouring to shew that the function in question is the essential characteristic of the super-ego and that what really distinguishes human beings from animals is the appearance of what in psycho-analytical terminology we call the super-ego function, to which I have given the name of the 'formal super-ego function'.³² I personally am solely responsible for this classification and terminology and I am not sure how many analysts would agree with me. I see no objection if anyone prefers to give some other name to this advance in ego-

³² Cf. 'Das Prinzip der mehrfachen Funktion', *Internationale Zeitschrift für Psychoanalyse*, Bd. XVI, 1930, S. 299 f., and 'The Problem of Freedom in Psycho-Analysis and the Problem of Reality-Testing', this JOURNAL, Vol. XVII, 1936.

development and to reserve the term 'super-ego' for something much more concrete. Nevertheless I think we should still be justified in extending the concept of the super-ego to include the function of which I have been speaking. In that case the first traces of this development, which is only gradually completed, are (as we know from exact data as to mental development) found at the end of the first or the beginning of the second year.

But what can be meant by speaking of a super-ego at a still earlier period, in the first months of life? We have no evidence that any function of self-objectivation, without which there can certainly be no super-ego phenomena, appears so early. All that we know of mental development contradicts such a notion.

Several authors refer to auto-sadistic tendencies or aggressive impulses violently assaulting the subject's own ego; they are said to derive from the introjection of an object which has become 'bad' through the projection of the child's own aggressive impulses and they are sometimes spoken of as an early super-ego. We need not consider this theory of the origin of aggressive impulses against the self nor need we discuss whether they are so powerful as some authors are inclined to believe. Let us be content to admit that such aggressive impulses do exist and to ask whether it is right to describe them as the super-ego.

Not every aggression against the self is an aggression on the part of the super-ego, any more than all self-love is the super-ego's love for the ego. Freud says that in humour the super-ego treats the ego in an affectionate and comforting way, and we are familiar with the application of this idea: the ego's wooing of the super-ego for its love and the super-ego's affectionate tenderness towards the ego.³³ But all self-love does not come under this heading, otherwise we should have to say that narcissism was a super-ego phenomenon and that every narcissistic impulse was a form of humour—which is certainly not to be recommended, however closely related humour may be to narcissism. It is the same with aggression against the self. We cannot maintain that every self-destructive tendency emanates from the super-ego nor that every auto-sadistic impulse testifies to its existence. To speak of the super-ego at a stage when id-impulses alone are in question would be to extend the concept of the super-ego far beyond what is scientifically admissible. The logical conclusion of

³³ Cf. in especial L. Jekels' writings.

such an extension would be to describe the death-instinct itself as a part of the super-ego.

It is of course a different matter to say, as Joan Riviere does, that '“ archaic ” feelings are a permanent element in the organization of the super-ego.'³⁴ There is no fundamental objection to this view. The auto-sadistic tendencies of an early period may contribute to the subsequent formation of the super-ego and lend to that institution something of their own aggressiveness, just as narcissism contributes to the positive relations of the super-ego to the ego, of which humour is an instance. But this belongs to the pre-history of the super-ego.

Now let us adopt the synthetic method and try to describe the development of the super-ego. We can distinguish six periods. The first is a period of latency, during which it may be said that, roughly speaking, nothing like the super-ego exists. This period covers the first year of life. Of course, the vicissitudes of the instincts during this period do nevertheless exercise an effect upon the subsequent development of the super-ego. The second stage is characterized by the appearance of the formal super-ego function, which develops gradually till the individual reaches maturity. During the third period the so-called antecedent phases occur, the various isolated internalizations of external commands and prohibitions, by means of identification, and the earliest phenomena of remorse and the tendency to self-punishment. The next phase is that of super-ego formation—or, if we prefer the term, of the integration of the super-ego—which takes place with the passing of the Oedipus complex. In this phase the antecedent phases are welded together, as Fenichel says, just as the component instincts become welded into a homogeneous sexual organization. A powerful inner code is formed, in which the separate commands and prohibitions are combined and the world is divided into good and bad. From that time on, part of the child's psyche is the ally of those who educate it and is in harmony with the demands of the outside world.

There follows a long phase in which the super-ego, thus formed, has not yet become firmly established and is still in communication with external objects in the manner described by Anna Freud.³⁵ It may still easily happen that the process of super-ego formation

³⁴ *Loc. cit.*, p. 418.

³⁵ 'The Theory of the Analysis of Children,' this JOURNAL, Vol. X, p. 29.

undergoes partial reversal and turns back again into a fresh object-relation, whereupon an internalization of the new object takes place. We say that the child or adolescent is not yet established in his character and we hesitate to allow him to get into bad company. This period of the super-ego's susceptibility to influence is a long one, probably lasting till the end of the twenties, though naturally the susceptibility diminishes as time goes on. The super-ego now enters upon its final phase and acquires that measure of stability which the individual in question has achieved. Of course, even then it is possible to influence it by mechanisms similar to those used during the earlier period. We have instances of such influence in women who are in love, in persons under hypnosis and in crowds. Apart from all this, a strictly conducted analysis may still modify the super-ego by analysing its origins in the patient.

IV

Phantasy and reality

Another problem raised by the writings we are studying is that of phantasy and reality or, as we may say, of reality and psychic reality. I have no doubt that in principle all analysts are agreed that we have here a complementary series; the fewer the factors of the one group, the more factors of the other group are necessary for the occurrence of a particular phenomenon.

Here we must distinguish two problems, which are not identical: that of the biological and social factors concerned in psycho-analysis and that of constitution and environment. In the former case we have to consider which phenomena are biologically determined and which produced by social influences, in other words, what is the relative part played in each phenomenon by biology and social environment. There is, for instance, the much discussed question whether the concept of mental disease is biological or social, or again, whether the Œdipus complex is a biological or a social phenomenon, whether puberty in civilized races is an artificial product, and so forth. On the other hand, when we consider how much in neurosis is to be attributed to the patient's character or other individual constitutional qualities and how much to environment we are dealing with the second problem.

The question of phantasy and reality, as raised in the works of Melanie Klein and others, is clearly part of the first problem. So

far, psycho-analysis has not propounded any detailed theory on the subject. This is an indication of Freud's unwillingness to generalize and his constant preference for the study of concrete individual questions. We can imagine two standpoints, one at either end of the pole. The one would tend to see psychic products as the precipitation of external influences. This might be called the sociological preoccupation. It is embodied in its most extreme form in the writings of W. Reich, who was formerly an analyst but finally dissociated himself altogether from psycho-analysis on this question as well as on a number of others. According to Reich, neurosis is a social phenomenon and, if social conditions are altered, there are good chances of its disappearing. We find a less extreme expression of the sociological bias in various psycho-analytical writings. Some analysts, for example, contend that anxiety always has its origin in an external threat, so that all anxiety is derived from objective anxiety. A similar, although modified, view is put forward by Fenichel, who follows Freud in describing a trauma as an excessive increase in need-tensions, but goes on to imply that this traumatic situation arises either in consequence of some external barrier in the way of gratification or of the inadequacy of the apparatus by which gratification is sought. He is quite consistent in concluding that, if the apparatus for gratification remains intact, the strength of the instincts cannot produce anxiety. Although Fenichel is introducing the factor of physiological immaturity or of the individual's helplessness in the face of instinct by reason of his lack of an adequate executive apparatus, his view too may be regarded as a sociological preoccupation. The discussion of the death-instinct is approached from the same angle by those authors who describe aggression exclusively as the reaction to external frustration.

The biological preoccupation attaches less importance to the factor of environment. According to this view, external experiences simply provide the material upon which the inner forces work.

If we wish to classify the writings of Melanie Klein and the other authors whom we are considering, we should say that at any rate their standpoint is diametrically opposed to the sociological view, that is to say, it is biological. But this is not quite correct, for we find, contrary to expectation, that the facts of psychic reality described by Melanie Klein are not of a biological nature or covered by biological laws. One could say that we are dealing with a kind of quasi-biology which has no biology in it!

Although psycho-analysis has not as yet formulated any theory which claims general application on the mutual relation of biological and social factors, it may nevertheless be said that it has in the main held a middle course on the problem or, to put it another way, that its theory is dialectical. Historically, psycho-analysis at first chiefly devoted attention to the external causes of illness (e.g. in the theory of traumas). Later Freud discovered that the phantasies of hysterics often did not correspond at all to the truth but were none the less pathogenic ; they were a part of psychic reality.

Now let us try, while avoiding all generalization, to give a schematic outline of the view held by Freudian psycho-analysis on this subject. So many points remain obscure that our scheme can be only a framework, leaving room for many differences of opinion on details.

I have tried elsewhere to draw up a scheme of the ways in which development or change in general takes place in the psychic life.³⁶ I took as my starting-point the principle of multiple function, and I defined this to mean that every psychic act has a multiple function in that it must comply with the demands of the outside world, of instinct and of the super-ego and, further, with the will of the ego to emancipate itself from these alien institutions. If every psychic act represents a more or less successful attempt to perform several tasks (namely, those set for the ego by the id, the super-ego and reality³⁷ and those which it sets for itself) we see that psychic modification may take place either through a change in the nature of the tasks or in the methods adopted for their solution.

In the first place, the tasks themselves may be modified through the development of the instinctual life, a modification of the environment, or the development of the super-ego. In addition to these, what we have described as the ego's effort to emancipate itself from the forces of the non-ego gradually develops. Secondly, a development takes place in the ego's methods of solving its tasks ; the investi-

³⁶ ' Das Prinzip der mehrfachen Funktion ', *loc. cit.* S. 297 f.

³⁷ It is somewhat inaccurate to speak of the tasks set by reality, unless we add an explanation of how real happenings become inner tasks. This takes place through all those tendencies in the subject which are directed towards the object-world : the libidinal and aggressive id-instincts, the impulse of self-preservation, anxiety and the effort of the ego to enlarge its boundaries and, further, the super-ego raises demands in reference to the subject's relation to the outside world.

gation of these methods is one of the subjects of ego-psychology. And, thirdly, there is another factor which really comes under the heading of modification of the tasks themselves. When a psychic act is performed in an attempt to deal with a situation involving multiple tasks, the act itself alters the situation. We do something and in so doing we change the outside world, with the result that the world thus modified sets us new tasks. Similarly the instinctual situation changes when we gratify or refuse to gratify an instinct. I think this scheme will be generally acceptable because it is sufficiently broad.

Now what, in relation to this question, is the view of the authors whose works we are considering? When we read what James Strachey says about the alternation of the processes of projection and introjection in the familiar vicious circle, we have the impression that there must be a 'rotation of phantasies.'³⁸

Speaking of the relation between reality and phantasy, Melanie Klein says as follows:

'We know that the child's early phantasies and instinctual life on the one hand, and the pressure of reality upon it on the other, interact upon each other and that their combined action shapes the course of its mental development. In my judgment, reality and real objects affect its anxiety-situations from the very earliest stages of its existence, in the sense that it regards them as so many proofs or refutations of its anxiety-situations, which it has displaced into the outer world, and they thus help to guide the course of its instinctual life. And since, owing to the interaction of the mechanisms of projection and introjection, the external factors influence the formation of its super-ego and the growth of the object-relationships and its instincts, they will also assist in determining what the outcome of its sexual development will be.'³⁹

According to this admirably clear statement, reality can have the effect of intensifying or lessening anxiety-situations. Strachey is therefore applying this notion quite logically when he describes the process of cure as a gradual alleviation of the anxiety-situation by means of the reality of the analyst. It appears that all that reality does is to increase or diminish the quantity of anxiety; if it has any further influence, it can be only in so far as development is deter-

³⁸ I am using a term coined by E. Bibring in a hitherto unpublished paper on technique.

³⁹ Melanie Klein, *loc. cit.*, p. 302.

mined by the intensity of anxiety, as is stated in the last sentence of the passage which I have quoted.

Here we have the difference in the estimate of the factor of reality. Those who hold that my earlier scheme was correct will hardly believe in a 'rotation of phantasies' and will feel that Melanie Klein's description is not comprehensive enough. Real experiences, in our view, are sometimes more than mere proofs or refutations of anxiety.

We certainly notice a very marked difference when we compare my scheme with Joan Riviere's description of the genesis of a psychic conflict. She gives an account of a practically automatic development of anxiety and of its elaboration by means of the processes of projection and introjection. Her estimate of the part played by reality is not a high one. She states indeed that the infant's aggression is the result of oral frustration, but it is assumed that that degree of frustration which is universally and inevitably experienced suffices in practice to produce the aggressive impulses under discussion. If such real experience as is common to every individual is enough to give rise to these phenomena, the latter cannot be said to depend upon the nature of the reality in individual cases. Reality moderates aggression or renders it more violent. Joan Riviere describes very impressively the favourable results which ensue from the presence of good objects, but she regards all this only as a matter of quantitative displacements within the process, though admittedly these have a powerful influence upon further development.

Of course, I do not imagine that what I have said is a refutation of Melanie Klein's view. My object has been not to refute it but to bring out the differences of opinion on this question. The fact that I believe my own view to be correct is, of course, no argument, nor is the fact that it agrees with the view of most analysts. There is one thing to be said, however, even though it is only an *argumentum ad hominem*: the scheme which I have outlined suggests itself naturally and we have a right to ask for exact proofs of any other theory, whether it differ from mine in its biological or its sociological preoccupation. But here we have come back to the questions discussed in the first sections of this paper and we ask what are the final proofs upon which this kind of demarcation of phantasy from reality is based. A reference to the results of analysis is also clearly no argument, for the very point in dispute is whether these particular conclusions can legitimately be drawn from such results. On the other hand it would not be accurate to say that this point cannot be exactly proved: a

proof which would be sufficient for all practical purposes could probably be obtained by some of the methods of verification discussed in my second section. Direct observation of a sufficiently large number of children would provide such proof.

In order to make it clear wherein the differences of opinion lie I would point out that I am *not* here arguing that more things are to be ascribed to the factor of reality than is suggested in Melanie Klein's writings. It is not a mere problem of addition, not simply a question of how many psychic processes have their origin in objective impressions. The point is rather that in our view reality enters into psychic development in quite another sense and that there is no such thing as a rotation of phantasies, but that the arc of life inevitably throws its curve through the outside world. This is what is indicated in my scheme.

Readers of the case-histories communicated by the children's analysts associated with Melanie Klein sometimes wish, when they read the various phantasies reported, that they knew more of the real incidents in the lives of these children. Acts of aggression directed against the contents of the mother's body occur, as we all know, for the most part when the mother is pregnant, or when the child has been told of the possibility that she is going to have a baby, or when he has some other occasion for thinking about the arrival of a brother or sister. Actions which represent something in the behaviour of an infant are carried out by a child when the real situation provides him with a motive for playing the baby or some other motive for this sort of behaviour. Whatever the content of these phantasies and however necessary it may be to study all the elements in them, they can never be wholly understood without a knowledge of the child's actual situation. So it is not enough to examine their content; they are never a mere continuation of old phantasies, woven, as it were, of themselves and detached from real life. We can only judge exactly why the child produced this particular phantasy or game at this particular moment, and what he is trying to convey by it, if we take into account at the same time the problems presented by reality.

Let us take a concrete example of what to us seems to be an underestimation of reality, which may perhaps be more exactly described as a *different* estimation from our own of that factor. We shall be leaving theory and launching straight into a problem of technique, but everything which we have already discussed from the purely theoretical standpoint must have its application to all the questions, small and great, which arise in our analytic work.

? Melanie Klein and some other writers commonly represent the relation of the patient to the analyst as transference pure and simple; the possibility that such a relation may be in part based on reality is not considered by them. This does not correspond to Freud's idea of the transference, according to which there are relations between patient and analyst which are based on the real situation, though of course also on the wishes and modes of reaction which the patient has developed in the past and brought with him to his analysis. Every relation contains elements which are of the nature of repetitions and other elements which have their basis in reality. The repetitive elements in an object-relation are the more numerous in proportion as the inner urge to translate them into reality is strong and as the object permits of this, i.e. in proportion as no counter-action springing from the psychic structure of the object itself destroys the incipient repetition. When the element of reality is almost *nil* we speak of transference.⁴⁰

There is no doubt that, for a number of reasons which I need not go into here, the analytic situation is specially favourable for the production of transference, so that its appearance in analysis is an invariable rule. It is determined above all by the behaviour of the analyst as *receiver*, the extent to which he refrains from any counter-action which might nip the patient's incipient transference in the bud. But it would surely be an exaggeration to say that the patient's relation to him is exclusively transference, and this exaggerated notion is refuted, in my view, by the mere fact that very often patients pass extremely shrewd judgements upon the analyst. These judgements may contain elements of transference, but this is not necessarily the case. When they are not complimentary the analyst may be tempted to interpret them as transference, but he is not always right in so doing.

For instance, Melanie Klein always describes the anxiety felt by children in analysis as transference, but other children's analysts are by no means convinced that the dread of the analyst which may be observed even during the first analytic session is really transference and not a dread which has its basis in the actual situation. There is good evidence that children have a number of reasons for being afraid

⁴⁰ These conditions of transference have been formulated by Anna Freud in her *Technik der Kinderanalyse*, but Freud's conception of the transference was always on these lines.

of analysis. In the first place, a child, just like an adult at beginning of analysis, does not understand the intention of analysis and only learns it gradually, but he very soon feels (feels immediately, when Melanie Klein's technique is employed) that in analysis his secret and hidden thoughts and all his little misdemeanours are being made the subject of discussion. Children often believe that the adult wants to find out these things in order to punish them, or to tell their parents, who will punish them; if this does not happen, then they become afraid the grown-up is going to seduce them. In his own conflicts between his instincts and the defence against instinct a child can only imagine that the adult who is concerning himself with them will take one side or the other in the conflict, and so he fears punishment or seduction. It is a long time before he grasps that the adult wishes to do neither the one nor the other but to help him by bringing his conflicts into consciousness and shewing him how to overcome them.⁴¹

Hence it is quite possible that some of the anxiety manifested by children at the beginning, and not only at the beginning, of analysis may be based on a real situation; for the child has had experience both of punishment and seduction but knows nothing of the help which the analyst is trying to give him.⁴²

There is another possibility which we feel must be taken into consideration: the anxiety with which children react to a 'deep' inter-

⁴¹ Cf. Jenny Wälder's account of this situation, 'Analyse eines Falles von Pavor nocturnus', *Zeitschrift für psychoanalytische Pädagogik*, Bd. IX, 1935, S. 18 f.

⁴² It may rightly be contended that this is not 'real' anxiety, for there is in reality no reason for the child to fear either punishment or seduction by the analyst and the anxiety has been imported by him into the situation in consequence of other experiences. If we like, we can call this transference too, but it is certainly not what we generally understand by the term. When Melanie Klein interprets the child's earliest anxieties in analysis as transference, she means that aggressive phantasies have been transferred to the person of the analyst, together with the anxieties accompanying them. The expectations with which a child approaches a new situation, the reality of which is as yet unknown to him and cannot yet be understood by him, are derived from all his previous experience and clearly bear a much closer resemblance to 'real' anxiety, and we must not allow an error in the presentation of the subject or an inaccuracy in terminology to prevent our making it quite clear what we intend to convey.

pretation (and we know that in Melanie Klein's technique such interpretations are given very early, indeed practically at once) may well be a dread of seduction. I am far from asserting that this is so, but the fact that this possibility is not weighed proves, as I think, that Melanie Klein and the children's analysts who adopt her views attach a smaller importance to reality than do others. If the child's anxiety is 'real', we can well imagine that, when it is interpreted as transference, the effect would be to allay it. He would then certainly react in the ways described by Melanie Klein, and these reactions might well have a therapeutic effect. But—and this brings us back again to the problem of the criteria of interpretation—this does not prove that the interpretation given was correct.

In connection with the problem of transference-love and the real relation to the analyst there has been criticism of another notion in Anna Freud's *Technik der Kinderanalyse*, namely, that when an analyst begins to analyse a child he must be at pains to establish contact with it. It is well known that this is repudiated by the children's analysts in Melanie Klein's circle. From their standpoint they are only logical, for, if every relation to the analyst is transference, and contact and transference are therefore identical, there is no need for the analyst to bring about the transference-relation by artificial means; it will develop of itself, and all that he has to do is to interpret it. Indeed, we are told that the interpretation itself serves to establish analytic contact. But this idea differs from Freud's concept of the transference, which admits of a relation based on reality, the opportunity for this being the greater in proportion as the patient's hunger for repetition is less and as the analyst departs from the attitude of complete passivity which assists the repetition, for these are the factors by which transference is determined. Anna Freud tells us that the repetition-compulsion and the analyst's passive response are conditions of adult analysis far more than of child-analysis. The child has but little hunger for repetition, for he still possesses his libidinal objects in reality; while the degree of the analyst's passivity may vary in matters of technique but can never, when he is analysing children, be absolute.⁴³

⁴³ This is because, however passively an adult may behave in his relation to a child, he is for the latter always a person in authority and therefore exercises an educating influence, whether he will or no. Owing to the transference there is a similar situation in the analysis of adults,

Even in the analysis of adults the establishing of contact between patient and analyst has always had a place, although a modest one. We try in the first analytic sessions to bring this contact about. It is true that this happens very quickly in the case of adults, and so there has not been much discussion of the subject.

V

Early ego-development

We have a more difficult task before us in this section than in the previous ones. When we were discussing the development of the super-ego or the problem of phantasy and reality, we were able to outline our own view and to contrast one thesis with another. But in the case of the early development of the ego it can hardly be said that a theory exists and we must content ourselves with pointing out uncertainties and doubtful questions.

In studying the theories under discussion one obtains the impression that many writers assume an exact correspondence between phases of libidinal development and phases of ego-development, so that Abraham's scheme of the former becomes a scheme of the latter.⁴⁴ To us it seems problematical from the outset whether any such exact correspondence exists.

Let us take a single point. The process of introjection is said to be modelled on that of oral incorporation and the process of projection on that of anal expulsion. Oral incorporation and anal expulsion are ego-functions connected with the preservation of life, but we generally consider them as *id-tendencies*. Projection and introjection are

but there it can be resolved if the transference itself is analysed, whereas in the case of a child, who is essentially a dependent and immature being, it is an unalterable reality.

Anna Freud's views on the part played by pedagogy in child-analysis have been much misunderstood. She never maintained that one should introduce a pedagogic factor (as an extra-analytical measure) whether for technical or therapeutic reasons, i.e. as a thing one can do or leave undone at will. Her view was that an adult cannot avoid being in the position of an educator in relation to a child, for every situation in which adult and child are in contact is a pedagogic situation; it therefore seems advisable to make the best practical use of what cannot be avoided.

⁴⁴ Cf. for example, Edward Glover, 'A Developmental Study of the Obsessional Neurosis', this JOURNAL, Vol. XVI, 1935.

attempts of the ego to solve its conflicts. It does not seem altogether justifiable to equate these two pairs of processes off-hand.

Under the headings of introjection and projection we include very various phenomena. Let us begin with projection. Sometimes it is assumed that all perception is based on projection. This has not been established, but it is one of the contexts in which we use the term 'projection'. Again, when an individual displaces into the outside world a stimulus which arises in his own mind, we call it projection; it was in this connection that Freud first introduced the concept of projection. Or, to take another example: by the age of seven months a child will touch his nose or his ear with his finger in imitation of an adult. This shews that at that age children already have some idea of the form of their own body and also of that of the other person. Pötl explains this as projection of the idea of the body. Or here is another point: towards the end of their second year we notice that children, when accused of a fault, begin to reply that someone else did it; they will blame a doll, etc. This is the mechanism of shifting one's own guilt on to someone else, and this too is a form of projection. Again, at a later age, possibly at about four years old, children will try to anticipate some attack which they fear by launching an attack themselves, a mechanism which Anna Freud describes as 'identification with the aggressor', and this also is projection. Finally we speak of projection in the case of the 'influencing-machine' of schizophrenics or when psychotics hear voices. Are all these phenomena which we call projection really the same thing? Do they really in origin and form represent a single process? It may be so, but in using the word 'projection', which refers to a formal characteristic in all these processes, there is a danger that we may overlook the fact that this question demands separate investigation.

I think that the position is much the same when we come to introjection. Here again we have an enormous number of manifestations, concerning which we are by no means certain that they are all identical in character; still less is it certain that, whenever this mechanism comes into play, a tendency to oral incorporation is at work. We will consider only three mechanisms of introjection, all of which are designed to protect the subject against his aggressive impulses.

One mechanism may be formulated as follows, 'I hate not him but myself'. The mental process here may also be described as identification, but it is really a mechanism for the avoidance of the dangerous situation brought about by aggression against the object. It does not

seem to me proved that oral incorporation-tendencies are necessarily at work here or are at least the prototype of this mechanism. The final product may none the less give the impression of identification.

This distinction between an oral manifestation and an attempt on the ego's part to solve a conflict (which, as we have seen, gives the impression of identification) comes out more clearly in the two other mechanisms. The one may be expressed by the formula, 'Do not hurt me, for I am already hurting myself; you must not punish me, for I am already punishing myself'. This is one of the methods by which the individual seeks to allay the anxiety aroused by a threat from someone else. It is a mechanism which plays a great part in the formation of the super-ego.

A similar mechanism is that of identification with an oppressor. It is a peculiarly oppressive situation to be the helpless victim of someone stronger than oneself. The situation is relieved if one identifies oneself with the oppressor, for then one leaves the ranks of those who are mastered and joins the masters and so can share in their triumph. This mechanism too has its place in the formation of the super-ego.

In both these cases there is a process which may be described as identification, but they seem to me to have almost no connection with oral incorporation. They are simply instances of the familiar attempt to solve a conflict by turning from a passive to an active rôle. Perhaps it may be said that not everything which looks like identification is necessarily oral incorporation. Although it is certain that there is a special proneness to identification where oral tendencies are concerned, it is in my view no less certain that everything described as identification cannot be equated with oral incorporation. This is only an example to illustrate the enormous multiplicity of these problems. It is doubtful whether the attempt to fit all these phenomena into the Procrustean bed of a single simple scheme is a profitable one.

Let us now consider the so-called psychotic modes of behaviour belonging to early childhood. Glover speaks of the 'psychic, frequently psychotic, reactions and mental systems characteristic of infancy and early childhood'. We read too of 'the small child passing through its schizophrenic and obsessional phases from the age of about one year onwards.'⁴⁵

⁴⁵ 'Medical Psychology or Academic (normal) Psychology', *British Journal of Medical Psychology*, Vol. XIV, 1934, pp. 36 and 40.

Other authors suggest that the psychotic modes of reaction may be observed in the infant's first year, from about the age of three months onwards, and speak of paranoid anxieties and melancholic depression. Now, of course, they do not mean that there is a phase in the normal development of the small child which amounts to a psychosis, but they do mean that 'the mental function of all children up to the age of three years or thereabouts is psychotic *in pattern*, that is, that the child's primitive instincts, his archaic anxieties and his bizarre reactions to reality are the very warp and woof of any subsequent insanity.'⁴⁶ Attractive as this notion may be æsthetically, we feel doubtful about it on various grounds. Let us go back to the direct observation of children. It is difficult to discover as a regular phase in normal infants anything which we could call paranoid anxiety or melancholic depression. In very favourable surroundings (I have already shewn what constitutes a favourable environment) infants often manifest no sign at all of anxiety, at least after the first weeks of life. The earliest form of anxiety seems to be that relating to the loss of the breast; even this is absent if the breast is regularly forthcoming. Only later, when they have learnt to recognize familiar figures, do they display anxiety at the approach of strangers and, in many children, this is the only anxiety-situation which occurs in the second half of their first year. And how is paranoid anxiety supposed to be manifested behaviouristically? Again, direct observation of most infants reveals no trace of anything suggestive of melancholic depression.

The whole notion of relating a normal stage in ego-development so closely to psychosis is a repugnant one.⁴⁷ We fear that those who hold this view misconceive the nature of psychosis and do not realize the great gulf which parts it from normal life at every stage. The very great difference between the as yet imperfect development of the function of reality-testing and its disintegration is not to be lightly underestimated. The difference is as great, or so it seems to be, as between an early stage of mental development and feeble-mindedness. In normal development there is no phase comparable with feeble-mindedness.

⁴⁶ Edward Glover, 'A Symposium on the Psychology of Peace and War', *British Journal of Medical Psychology*, Vol. XIV, 1934, p. 276; cf. also *Almanach der Psychoanalyse*, 1935, S. 218 f.

⁴⁷ Repugnant, but not, I think, because it would involve a fourth wound to human narcissism; no pronouncement about so early a stage affects us strongly.

Altogether I think that we have here an overstraining of the concept of regression. It is as though every pathological phenomenon must have its prototype in a normal stage of individual development. Whether this be so may be a debatable point where the psychoses are concerned ; that it is not a general phenomenon of psychopathology may be proved by an illustration from cerebral pathology. In optical agnosia patients lose the capacity to perceive forms and they make use of a roundabout method : they let their eyes or hands travel over the objects before them with an almost imperceptible movement and then rapidly draw their conclusions. But this capacity, acquired in their abnormal condition, has no place in normal development.

In psychosis the ego-organizations break down and begin to function pathologically. Many psychotic phenomena may represent regression to earlier stages of the ego, others perhaps a reversion to more primitive modes of functioning of the system, modes which never had an independent place in its development. This too is a kind of regression, but it is not regression to an earlier stage. Others again may be new formations of reactions by the damaged organism (as in the instance of agnosia). Here everything that already exists is, of course, utilized. These are psychotic attempts at dealing with a situation ; they have no prototype either in ontogenesis or in phylogenesis, nor can they be altogether explained as a reversion to primitive modes of functioning.

M. Katan has stated that mechanisms come into play in the psychoses which do not exist in normal development,⁴⁸ and that projection and introjection in mental disease are by no means identical with these processes in normal persons and neurotics. For the psychotic is always making an attempt at recovery ; in schizophrenic projection the outside world which has been lost is being reconstructed on the model of the ego, while in melancholic introjection the ego which has been destroyed is reconstructed on the model of its objects. Whether we share Katan's views that the mechanisms are actually different in psychotic disease is a separate question, but we do feel sure that psychosis and normal development are not so closely related as some writers appear to suppose.

The analytic study of the psychoses is in its infancy. We have

⁴⁸ Cf. papers read by Katan at the Thirteenth International Psycho-Analytical Congress, Lucerne, August 28, 1934, and the Fourteenth International Psycho-Analytical Congress, Marienbad, August 7, 1936.

not yet solved the riddle of exactly what constitutes psychosis. With the exception of the processes described by Katan, something similar to everything which has been observed in psychosis occurs in normal life and in neurosis. The characteristic feature of psychosis, the irremediable disturbance of the function of reality-testing, is still an enigma. It seems likely that we shall shut the door on the true explanation of psychotic phenomena if we try to account for them by assigning them to phases of normal development.⁴⁹

Let me give a little illustration which takes us away from this consideration of fundamental principles and which contains in itself all the differences of opinion in the two schools of thought, as indeed would probably occur with every detail that we examined more closely. In the paper to which the present contribution more particularly refers, Joan Riviere says that 'the discharge of excreta would in phantasy be *felt* as a transference of the painful excretory substance on to or into the object'. 'The persecutors in a paranoia are feared like *revenants* who may appear from nowhere; and we know that they derive from *fæces*'. The notion of anal persecution was discovered by Stârcke and van Ophuijsen. The above passages suggest an explanation of it. Now during the analysis of a child Jenny Wâlder gained some insight into anal persecution.⁵⁰ A child in the latency-period suffered from a dread of persecution by an imaginary figure, and the name which he gave the latter sounded almost exactly like a vulgar term for excrement. His own excrement aroused in this child acute anxiety and so did the drain in the water-closet, which he regarded as an uncanny place. One day he told the analyst something of the causes of his anxiety. He said that animals eat their enemies up, and then the enemies are very angry and come out of the animals' bodies again during evacuation; so one can't help fearing that then they would avenge themselves. Perhaps we have a clue here to the remarkable phantasy of the anal persecutor; one has devoured one's enemies and the *fæces* are nothing but these same enemies re-emerging after the 'passage through the self' (E. Weiss). The phantasy is quite like a fairy-tale and recalls familiar themes. We remember how Little Red Riding-Hood's grandmother, when devoured by the wolf, continued to live in his belly, although a little restricted in space.

⁴⁹ On the other hand, various English authors hold that by so doing we shall *open* the door to the true explanation of such phenomena.

⁵⁰ According to an unpublished communication made to the Vienna Psycho-Analytical Society, June 17, 1936.

This phantasy is very like those reported by Melanie Klein, but there are differences. It is a fully worked-out phantasy, apparently belonging to a later stage of development, not simply the infantile displacement outwards of excreta which are felt to be hostile because painful. The hated objects of the aggression were Œdipal objects; the fact that the aggression took the form of the impulse to devour them and to expel them anally is, of course, a consequence of pregenital development. In other cases perhaps the hatred would not be directed against the Œdipal object; nevertheless there is still a phantasy, of the nature of a fairy-tale and belonging to a later stage, a phantasy woven out of oral and anal themes which lie ready to hand, and not the simple process described by Joan Riviere. Another difference is that the phantasy related by Jenny Wälder's little patient does not represent a phase of normal development but is part of a pathological development. Thus, according to the one view, the infant, normally, as a regular stage of development at a very early period, construes the daily process of defecation as anal persecution, while, according to the other, this is an unusual phantasy, occurring at a much later age, and not a part of normal development.

It may be said that here we have theory against theory and that the 'deeper' theory is the more likely to be right.⁵¹ But the one theory has a sound basis; a child endowed with insight has himself supplied the answer to the riddle. The other theory depends on constructions in a past which is lost in obscurity.

VI

An example

I think that some of the points which I have made here may be illustrated by an example communicated to me by an analyst from the observation of her own children.

A little girl of three years old whose upbringing had presented no difficulty in her first year and little serious difficulty in her second and third years, suddenly began to shew signs of trouble. She was heard one day saying to herself, 'Mummy has smashed me up'. At about the same time it happened that when her mother was drying her after her bath the little girl displayed great anxiety every time the mother approached her genitals with the towel.

⁵¹ In a later section I shall discuss the question of the importance of the deep unconscious.

Now let us pause for a moment. We might suppose that this was an instance of the processes described by Melanie Klein and that the child was suffering from a dread of retribution for aggressive acts directed against her mother's body or that she was projecting her own aggression on to her mother. But this supposition is not borne out. On the contrary, we have good reason for seeking the causes of these sudden troubles in the little girl's mind elsewhere—in the familiar difficulties of the castration complex and penis envy.

Some months before this episode, this child and a sister a year older than herself had seen a little boy naked when they were playing on the beach. Probably this was the first time that they had noticed the difference between the sexes. The elder sister, at that time three years and three months old, reacted immediately and very definitely; the younger at first showed no reaction. We are not here concerned with the reactions of the older child; I will merely say that for a long time she was occupied in working over this experience and several times discussed it with her mother in the presence of her younger sister. Thus we are inclined to suppose that the latter's reactions, as manifested in the incident I have described, were part of the castration complex and that her complaint that her mother had injured her was the familiar accusation, of which Freud has told us, that the mother was to blame for the little girl's lack of a penis. We shall soon see the further material by which this interpretation is borne out.

There is another argument against construing the child's behaviour as a manifestation of oral-sadistic aggression and anxiety. Though her mother observed her carefully, the baby gave no sign during her first year of the presence in the oral phase of any considerable degree of aggression or anxiety of that kind. During her first three months she cried very little nor did she ever really scream with rage. During her second month the summer holidays occurred and this made it possible for her mother to dispense with the by no means strict rules as to the times at which the child was fed and to suckle her whenever she demanded it. The effect of this was that, at the age of three months, the baby ceased to cry for food. It appears that her dread of being hungry and of her mother's breast being withheld had been so completely allayed that, from that time on, it was a matter of indifference to her when she was fed. She did not protest if this did not always happen at the usual time or if there was an interval of even ten hours between her feeds during the night. For months at a stretch, the child, who was physically healthy, was never heard to cry,

much less to scream. At the same time she was by no means dull but gave the impression of an active, intelligent little mortal. It was much later, at the end of her first year, that she shewed signs of aggressiveness and then in another direction. From this early infantile history it seems unlikely that violent oral-sadistic aggressive impulses and anxieties had developed at so young an age.

But the convincing proof of the nature of the difficulties which arose when the child was three lies, I think, in other incidents of this period and in her later development. It happened that, at about the same time that she made the remark I have recorded and displayed anxiety lest her mother should touch her genitals, the children's father went into the nursery and tried to shake hands with them. The younger of the two refused to give him her hand, saying, 'I won't give you my hand, I will only give you my finger'. When her father asked in amazement why she did so, she replied, using her own childish terms, that it was because he had a penis and 'a little bag'. (Her knowledge of the scrotum could only have been derived from the incident on the beach several months previously; it had never been mentioned in the conversations between her elder sister and the grown-ups.) It is true that she only said this once. Only a few hours later, when her father, hoping to elicit the same reply, again asked her to give him her hand, she refused, as she had done before, but gave as her reason, 'because you've got an apron'. The displacement had been made with extraordinary rapidity, within a few hours. (The fact that she had turned her father into a woman is another story.)

From that time on, certain difficulties arose which might perhaps be called symptoms. At meals the child did not want to have her meat cut up and wished to take all her food only in large pieces, not divided up in any way, so that in fact it was impossible for her to eat them. For instance, she would not allow anyone to break off a piece of cake for her, and so forth. A dog which she knew was once brought to see her when it had just been shaved and the effect was to give her a shock. She became more and more preoccupied with the idea of 'big and little' until she could think of nothing else. The rivalry in relation to her elder sister, which had long ago been allayed, broke out again. The younger child constantly thought about how much older her sister was and how soon she could catch her up. She phantasied that she was big and her sister little and invented a game in which she was the mother and her elder sister the baby. She took a

great delight in this game. Anyone who entered the nursery was immediately scrutinized as to his or her height, and at night she would beg grown-ups to sit beside her cot, using the phrase that 'big' X (man or woman, as the case might be) was to sit beside her. Spectacles worn by adults were for her an object of the liveliest interest, and at one time, whenever her father, who wore glasses, approached her, she immediately began to talk about them and to investigate them, refusing to talk about anything else. She also evolved a theory that she had once been big and had only just become little.

Now I think that all this material goes to prove that everything I have related represented attempts on the child's part to work over her castration complex by methods familiar to us in our female patients and not a conflict springing from oral-sadistic aggression and anxiety. The desire to have food which had not been cut up is perhaps reminiscent of the phantasies described by Melanie Klein, but the fact remains that this slight symptom appeared *at that particular moment* and that the child herself explained it in her remark to her father as clearly as we could possibly expect.

The little girl also developed a transitory symptom in the shape of a tic. On one occasion she took hold of her nose and asked if it was a big one. This gesture very soon became a tic: every moment she put her fingers to her nose. At this point her mother intervened with an interpretation and gave a suitable explanation that nothing had been taken away from the child, that all boys and men were from their birth like the little friend whom she had observed, that all girls and women, including her mother, were like herself and that the one form was just as nice as the other and that some day she would have children. At first this interpretation had no effect, but its effect was instantaneous when it was repeated by the other child, the sister a year older than herself. The tic vanished the same day.

Finally the child developed a habit of blaming her mother for everything disagreeable which happened. If she dropped anything, it was her mother's fault, although the latter was often nowhere near: she should have looked after her better. The same explanation applies here—the child was reproaching her mother, who was really 'to blame for everything', seeing that she had not borne the little girl as a boy. Matters went on thus for some months, when the episode occurred for the sake of which I have chosen this example.

One night the mother was awakened by the child's crying and saying that 'it had blown on her tummy'. As the child was partly

uncovered, the mother at first thought that she felt cold. But the little girl went on to say that she had wanted to bite her genitals and that then it blew. So it was a question of a dream and of one which, in comparison with most of the dreams of children of this age, had been much distorted. The mother soothed the child for the moment and suggested that she should go to sleep and that the next day they would talk about it.

The next morning the mother asked the child to tell her the dream again. She learnt another detail: there was a man at the window whose face was smashed and he had a piece of bread in his hand. The man mustn't come into the room.

The mother asked about the astonishing dream-element that the child had wanted to bite her own genitals. The little girl said (naturally using her childish words) 'The genitals were big, the genitals were little'. She then stood up, blew out her abdomen and said, 'It blew like that'.

Now let us pause again. Once more we are tempted to think of the phantasies described by Melanie Klein. The 'biting' and the blowing-up of the child's own body naturally suggest aggression against the mother's body and anxiety for the integrity of her own. But investigation of these elements leads to another conclusion.

The mother's intimate knowledge of every detail in the child's life enabled her to understand the situation immediately from the little girl's words and gestures. In the last few months she had manifested acute anxiety. In her nursery, as in that of many other children, there were toy balloons which could be blown up. Sometimes, if one blew too hard, a balloon burst. The child had displayed great anxiety when trying to blow one up herself and when her nursery-governess did so. Often the little girl would cry out that they ought not to do it, the balloon would burst. When she herself tried to blow it up she was awkward about it and held the mouthpiece, which was made of soft rubber, between her teeth instead of between her lips, so that she generally did not succeed. She had been told not to bite it and then it would go better. It must be noted that a balloon in a collapsed condition, the rubber bladder with a tube-shaped mouthpiece, really does look very much like a penis with the scrotum.

The mother's knowledge of this detail enabled her to understand a fragment of the dream. The dream-thought obviously was that the child wanted to blow up her own genitals and make them big like those of the little boy and that she was seized with anxiety lest they

should burst. This explained the other dream-fragment : that it had 'blown on her tummy'. Thus the biting could hardly be described as aggression : it simply indicated what she did to her balloon.

The mother interpreted this fragment to the child, telling her that she had been afraid of her genitals bursting if they were blown up. The child replied, 'But they have burst already', thus betraying the phantasy that her genitals had once been blown up, had burst and so had arrived at their present miserable condition. It was plain that in her phantasy her mother was to blame.

The detail of the man with the smashed face and a piece of bread in his hand, who was at the window and must not come into the room was explained as follows. On their daily walks the children used to meet a cripple, who begged for bread. This experience supplies another proof of the possibility of being broken up : 'he must not come into the room'.

Upon the mother's interpretation the child's face lighted up, proving that her mother was right and that really a certain amount of material had been released. Remembering the psycho-analytical success of the elder sister, which I have already recorded, and the generally recognized fact that children are specially impressed by what other children tell them, the mother repeated her interpretation and explanation in another form. On the child's asking whether she also had dreams and begging her to tell one she recounted an imaginary dream of her own. She said she had dreamt of a little girl who cried bitterly because she was a girl and who thought that her mother had once blown her up and that then she had burst and now was smashed. But a great crowd of children told her that she **was** not smashed but just as nice-looking as boys were. The mother described the conversation between the little girl and the other children, in which the little girl was finally convinced, and how she was now quite contented. The child followed this story with a delighted smile, indicating a sense of relief.

This does not by any means exhaust the meanings of the dream. On the previous day (not for the first time) the little girl had heard it said that children were once inside their mother's body. She had, of course, long known about pregnancy ; some time before, she had had a married nurse who became pregnant and remained in service for a time. The children had known that she was going to have a baby and, later on, she had brought it to see them. Thus the dream was concerned with the dangers of feminine existence : not only had her

own originally male genital burst, but if she ever had a baby, she would be in danger of the same fate.

No doubt we could still learn much from the dream. For our present purpose it has not been necessary to consider the elements which relate to the Œdipus complex.

In this example all the elements of the phantasies described by Melanie Klein appear to be present: aggression against the mother, oral-sadistic activity ('biting'), dread of injury to the subject's own body, a swing-over to self-injury, the idea of injury inflicted by the mother. And yet they could apparently all be simply and satisfactorily accounted for by an explanation to which the child herself directly assented and which is not what we should expect from Melanie Klein's writings.

We might, of course, pursue the analysis further and possibly come to the conclusion that the biting did indicate oral aggression. But, even if further psycho-analytical investigation revealed oral-sadistic anxieties, the impression persists that the child's conflict and the formation of her slight neurotic symptoms had their source in penis-envy and the attempt to deal with it, and derived their force from that affect. Further investigation would hardly lead us to Melanie Klein's theory but simply to the recognition that pregenital (e.g. oral) impulses influence the child later when he experiences the well-known castration and Œdipus conflicts. Such pregenital antecedents of these complexes have constantly been sought and described. For instance, no one has ever disputed the fact that a passive anal position of the libido, encouraged when a child is given enemas for constipation, has an effect later on the complexes in question. There can indeed be no doubt about the matter if we are considering merely influences of this kind which pregenital development may exercise on conflicts during the third and fourth years.

But, in my opinion, although the child's conflicts at this age *may* bear a specific pregenital impress, this is not invariably the case. The experiences connected with the castration complex, penis-envy and the Œdipus complex seem in all circumstances (for reasons which we do not yet know) to have concealed within them elements of pathogenic conflict. On the other hand, the oral and anal phases can, I think, be passed through without such conflicts, and probably educational influences will suffice to keep them free from pathogenic elements, at least in children who are not too heavily handicapped constitutionally.

We are quite prepared for the objection that this material cannot

legitimately be utilized, because the child had not been analysed. Well, the word 'analysis' is not a magic formula. We are in the habit of saying that certain material is not evidence because the individual in question has not been analysed, by which we mean that we do not know enough about him and that the analyst's long and intimate study of the patient and their joint work under the conditions of the fundamental analytic rule would have enabled him to find out much more and by means of free association to accumulate far more material than would otherwise be possible. In the case before us the situation is different. Surely the analytical observation of the child from its earliest days by one who was at once mother and analyst, together with her intimate knowledge of all the events in the child's life and the discussion, in complete accordance with analytical principles, of what was not as yet understood, provides material equivalent to analysis by a strange analyst. Perhaps, indeed, the mother would know more than an analyst could easily discover. She was able to explain the dream because she knew every detail in the life of the child, whereas a strange analyst would have been in a much more difficult position. We cannot say for certain whether the child, who was at this time three and a half, would have told the latter about the balloon and her own dread of blowing it up and her awkwardness with the soft mouthpiece. But we may suppose that, if the analyst had been treating a still younger child, she would never have succeeded in getting this information.⁵²

⁵² I think it may be useful to give a short summary of the material upon which the interpretation of this fragment of an analysis is based.

It is a fact that the child and her elder sister had seen a little boy naked some months before the difficulties described arose. So those difficulties were probably due to the deferred effect of a sudden experience. Here we note the following points :

(1) There is a great deal of evidence to shew that experiences do have a deferred effect (cf. Freud's remarks in 'The History of an Infantile Neurosis', *Collected Papers*, Vol. III, pp. 516 ff.). Hence such an effect is *possible*.

(2) At the time of the observation the child was comparatively young, and so it was not surprising that the experience had no immediate effect and, since we know that all little girls react in one of the familiar ways to the fact of the difference between the sexes, it was only to be expected that these problems would ultimately arise. The only doubtful point would be whether this would occur as the deferred effect of her experience

It might be objected further that the mother was not a suitable person to observe her own child, even though she herself was an analyst. We all know many instances of the unreliability of what parents tell us about their children. This is an objection which cannot be simply dismissed, but we wonder why the mother, who was able calmly and without any internal conflict to note the child's aggression against

on the beach or as a result of similar, recent discoveries. But in this case we must remember that the elder sister had reacted to the earlier observation and had discussed her reactions in the presence of the younger child during a period of some months. It was therefore only to be expected that the latter would eventually display some such reaction.

(3) The deferred nature of the reaction was in accordance with the child's character. She was always rather quiet, though full of interest in all that went on, and she often surprised those around her by speaking of incidents which had taken place some time before. Probably she had been silently turning them over in her mind in the interval.

So the conjecture is entirely plausible that the earlier experience, which had been kept alive in her mind by the conversations with the older child, produced an effect later, when she herself was older.

Let me once more summarize the ensuing phenomena :—

- (1) Her idea that her mother had 'smashed' her.
- (2) Her anxiety when her mother, in drying her, approached her genitals.
- (3) The refusal to give her father her hand and the reason which she gave for her refusal, namely, that he had male genitals.
- (4) Her lively interest in spectacles.
- (5) Her habit of repeatedly touching her own nose and asking if it were a big one, a habit which finally became condensed into a tic. The immediate disappearance of this symptom when the older child gave the interpretation based on the castration complex.
- (6) Her lively interest in 'big and little.'
- (7) The idea that she had once been big and had become little.
- (8) Her tendency to blame her mother for everything disagreeable that happened, on the ground that she had not looked after her.
- (9) Her refusal to allow meat to be cut up for her at meals or a piece of cake to be broken off or to eat a piece of an apple, etc., and her demand to have all these things given to her whole, although they were too large for her to eat.
- (10) Her acute anxiety lest the balloon should burst when blown up and the shock which it gave her when this actually happened.
- (11) The anxiety which she displayed when she saw in a shaved condition the dog which she had been accustomed to see with its full coat.

her when it was prompted by resentment at having been born a girl or at having been made a girl by 'bursting' and who recorded how the little girl turned from her under the influence of the Œdipus complex, should shrink from understanding the aggression when it sprang from oral conflicts. To judge by our experience of adult analyses it is not the episodes connected with the very early days

All these incidents can be taken together as manifestations of the feminine castration complex. In general we reckon it an advantage if a large number of phenomena can be explained by a single principle. It would certainly be possible to explain otherwise part of the child's behaviour (e.g. her dislike of food which had been cut up) and it seems possible that in certain isolated points there were other determinants at work. But no other explanation would fit *all* the phenomena.

There is, further, the fact that these phenomena are variants of modes of behaviour which, as we know by experience (from the observation of children), occur in all little girls as a reaction to the perception of the difference between the sexes, or (to be more exact and to avoid any *petitio principii*) we know that they occur *after* this perception.

Again, we must note that in respect of one of the points which I have enumerated we are not depending on interpretations but on what may be called a fact, i.e. according to the theory of gradation which I suggested in Section II, with an interpretation of a lower grade. I refer to point (3); for the child herself explicitly and without being influenced by any expectations on her parents' part gave as her reason for refusing to shake hands with her father the fact that he possessed male genitals.

So much for the phenomena which occurred before the dream. The interpretation of the dream itself is borne out by the following considerations. The mother at first did not know what to make of it and so had no preconceived ideas about it. She found the clue only when the child said that her genitals had been big and little and told her about the blowing-up of her abdomen. Specially remarkable is the little girl's answer to her mother's first attempt at interpretation, when it was explained that she had feared that her genitals would burst when they were blown up. She said, 'They have burst already'. This meant that the child accepted part of the interpretation, while correcting another part. To agree and at the same time to correct is a particularly valuable confirmation, because the fact that the child made a correction makes it less likely that she was influenced by suggestion and so makes her acceptance of what she did accept much more likely to be true. In fact, any possible suspicion that a suggestive influence was exercised, if not proved to be entirely baseless, has at any rate much less to justify it.

We must bear in mind that the interpretation was not arrived at by

which rouse the strongest resistances; the happenings of the first year of life, quasi-biological processes, do not affect us so much as the bitter conflicts arising out of the Œdipus and castration complexes.⁵³

VII

The Importance of the 'deep' unconscious

From time to time the writers of the works which we are discussing attack some statement by the opposite side on the ground that it applies only to consciousness or to the mental strata nearest to consciousness while in the unconscious, the depths of the psyche, it is otherwise. No one can take exception to a reminder of this sort; we are all endeavouring to learn more about these deeper strata and until they have been investigated as thoroughly as possible no analysis can be said to have been completed. But the remarks which I have in mind seem to imply something more than the mere reminder that certain statements are true of the higher strata only. The implication

interpreting symbols, i.e. without the co-operation of the child, but was based on her own explicit statements and on her mother's intimate knowledge of the details of her everyday life.

How did the child react to the final interpretation? Naturally we cannot expect a child to say what an adult usually says immediately or a little later, 'Yes, I realize that in myself and it has always been so'. Instead, she smiled a smile of happy relief. Of course it may be objected that it is our interpretation when we say that the smile expressed agreement and inner release, but at all events it is an interpretation of a lower grade, in the sense of our theory of gradation. It would have been possible to convince others of what was conveyed by this smile, if it had been represented on a film.

⁵³ I have already deprecated the polemical application of psychoanalysis and said that in my view it is unprofitable. Scientific discussion must be based on a comparison with reality. We have therefore no intention of trying to displace the discussion, for to do so does not elucidate any problems and it degrades analysis into a mere weapon of force, besides which it is never convincing even in its analytical aspect. So I have no polemical intention when I say that Melanie Klein's displacement of accent from the conflicts of the third and fourth year to problems of oral wishes, frustrations, aggression and anxiety at an earlier age is a displacement from the line of greater to a line of lesser resistance.

is that what goes on there is of little or no concern to analysts and indeed does not really occur at all. There seems to be some idea that only the unconscious 'really' exists at all. Anyone who studies the more superficial strata of psychic life is, we may suppose, very likely himself a superficial sort of person.⁵⁴

I could give many instances of this. Let us consider the point in the light of a technical example.

In her *Technik der Kinderanalyse*⁵⁵ Anna Freud shews that it is necessary, when analysing children, to impart to them some insight into their illness or at least something equivalent to such insight. The position of a child who comes to be analysed is different from that of an adult, who knows that he is ill and generally comes on his own initiative to receive relief. When children are brought to be analysed it is always because their parents decide that it is the right thing for them. Often a child's symptoms are such that his parents suffer more on account of them than he does himself. He is not, as it were, a system complete in itself. In an adult the disease and insight into the disease, or the disease and the desire to get well, are all comprised in the individual himself, but in a child the various aspects of the case are represented by several people. The child is ill and it is the parents who possess the insight into his illness and have the desire for his recovery.

Now the analysts of Melanie Klein's way of thinking have raised a number of objections to the attempt to give children this insight. They say that it is contrary to analytical principles, that it is a form of pedagogy, substituted quite unjustifiably for analysis, and that we cannot possibly be sure that by exerting this kind of educational influence (however it may answer its purpose) we are not making regular analysis impossible. Nor does the adult's will to recover achieve much, for it exists 'only' in his consciousness. If we analyse it, we shall discover it in various neurotic wishes, such as the wish to gratify infantile impulses or to keep them under and strengthen the ego's defences or possibly to get rid of them by some magical means, as Nunberg has shewn.⁵⁶ To give a child insight into his illness is to evoke, instead of to analyse, anxiety.

⁵⁴ We see how easily we may be led astray into taking the pictorial terms of psycho-analytical topography too literally.

⁵⁵ Internationaler Psychoanalytischer Verlag, 1927.

⁵⁶ H. Nunberg, 'The Will to Recovery', this JOURNAL, Vol. VII, 1926.

This criticism almost suggests that Anna Freud's views are a complete novelty where psycho-analytic technique is concerned, a kind of incursion of pedagogy into analysis. But this is not so. In reality her ideas on child-analysis are the application to children of psycho-analytical notions, long familiar and generally accepted, which have not before been called in question.

Nobody doubts the conclusions of analysis with regard to the will to recover, which are embodied in Nunberg's paper. It is true that all these neurotic wishes can and must be brought to light in the analysis of the wish to get well. But this does not mean that there is no such thing as a wish to get well and Nunberg never drew any such conclusion. In adult patients there is a conflict. One part of the personality, namely, the conscious personality, desires to get well while another part clings to the neurosis. The fact that neurotic tendencies come into play even in the will to recover does not really alter the situation in the conflict. And we utilize this conflict in the analysis, for we enter into an alliance with the healthy part of the personality to fight against the neurosis. Elsewhere I have said that we need a 'fixed point of Archimedes' in order to lift the neurosis off its axes.⁵⁷

We know that it is peculiarly difficult to cure an adult patient whose analysis reveals a total absence of insight into his own illness and of will to recover and in whom no conflict is taking place at all because the neurosis has the full consent of the ego. If a pervert is content with his perversion and does not want to get rid of it, analytic treatment will be unavailing unless it can somehow succeed in setting him at odds with his abnormality. It has therefore often been said that in order to be analysed the patient must suffer. Where insight into his illness and the will to recover are lacking in an adult neurotic, it has always been the practice of analysis to convey such insight to him artificially and to make him discontented with his symptoms. The great difficulty in analysing character-neurosis, in which the symptoms form an integral part of the ego-structure, is this lack of insight.

In analysing adults we naturally try to kindle this insight as far as possible by purely analytic methods: we shew the patients their true condition. Sometimes this is enough. If so, it is because there is

⁵⁷ 'The Problem of Freedom in Psycho-Analysis and the Problem of Reality-Testing', this JOURNAL, Vol. XVII, 1936, p. 93.

after all in the patient's mind a certain inner discord. But it is not enough in every case. At times the analyst exercises an influence which we need not hesitate to call educational. For instance, he points out to the patient what may be the consequences of his symptoms in real life or what an unfavourable view is taken of them by other people, notably by the analyst himself.

This is a commonplace of adult analysis and has been the subject of a great deal of discussion, sometimes in connection with the treatment of cases in which the disease is consented to by the ego or forms part of its structure (e.g. in perversion and character-neurosis) and sometimes in connection with the analysis of persons who are very largely normal.

Anna Freud has applied this familiar analytic principle to the analysis of children and has pointed out that what we encounter only occasionally in adults is a regular feature of child-analysis and that therefore with child-patients we must regularly use the method which is only occasionally necessary in the case of adults.

The line of criticism to which I have made reference in this section seems to imply that any process which takes place in the conscious personality only is as good as non-existent. Now in adult patients the will to recover exists for the most part only in consciousness, in the higher strata of the ego. It is therefore assumed that it may almost be said not to exist at all, since it is only the unconscious side of the human mind which is credited with the power to exert a 'real' influence, the degree of 'reality' varying directly with the depth of unconsciousness involved. But this is a view which one is tempted to describe as the creation of a mythology of the unconscious.

We wonder what meaning interpretations of the unconscious could possibly have, were there not some conflict in the mind of man, a disharmony between the will of the ego in its higher strata and that which is imposed on it by the id, the super-ego and its own lower strata. Surely the aim of interpretation is always to enable the higher strata of the ego to find a different resolution of its instinctual conflicts by making the unconscious conscious. But for an inner disharmony in the human psyche interpretation could not possibly have any effect.⁵⁸

⁵⁸ Cf. my remarks on the effect of psycho-analysis in 'Die Psychoanalyse im Lebensgefühl des modernen Menschen', *Almanach der Psycho-*

Jones has contributed to psycho-analytical theory one of its most important concepts, the term for which has become so much a part of ordinary speech that those who use it hardly realize that it is a psycho-analytical concept at all. I refer to *rationalization*. It is true that, when we expose something as a rationalization, we reveal unconscious motives of a different kind from those which are manifest. Yet it is not only these other motives which 'really' exist. The mere fact that the rationalization takes place shews that there is a second trend in the psychic life. This trend, like the will to recover, may be feeble; in the past it has been so feeble that it could not hold its own against instinct. Nevertheless, it has been strong enough to prevent the latter from advancing direct to its goal.

In the creation of a mythology of the unconscious we have the antithesis to the pre-analytical thesis. According to pre-analytical and non-analytical psychology the only psychic system is that of consciousness. Those who hold the antithetical view maintain that the only thing that really exists, or at any rate is worth the analyst's investigation, is the deep unconscious. There is probably a greater measure of truth in the antithesis than in the thesis, but it is not true either.

We can see how it is that many analysts have concentrated exclusively on penetrating to the 'depths', investigating the unconscious life of phantasy and revealing the contents of very early stages of mental development. This endeavour to explore the unconscious is justifiable and necessary, so long as the unconscious is not held to be the sole object of research, for this is to neglect other psychic strata, the whole complicated network of ego-elaborations (with the exception of the very earliest, or what are supposed to be the very earliest, defence-mechanisms).⁵⁹ But this brings us to the subject of the next section.

analyse, 1929. We can see how it is that, if the therapeutic effect of interpretation is not properly appreciated, the theory of psycho-analytic therapy comes to be based on the breaking of the vicious circle of the patient's phantasies through the intervention of the real personality of the analyst.

⁵⁹ In his contribution to the Symposium held at the Fourteenth International Psycho-Analytical Congress, Marienbad (this JOURNAL, Vol. XVIII, 1937), Edward Glover says that there are three main therapeutic approaches in analysis: (1) the analysis of mental mechanisms, (2) the analysis of affects, (3) the analysis of instinct. The mechanisms

VIII

The relation of the 'deep' unconscious to the psychic strata nearer to consciousness.

My readers will be aware that, whilst the writers whose papers are the subject of our present discussion have been endeavouring to enlarge our knowledge of unconscious phantasy-life, other analysts have devoted more and more attention to the study of the ego, though their interest in the deep unconscious has not flagged. In his two most recent theoretical works Freud laid the foundation for this extension of psycho-analytical interest. In *The Ego and the Id* he formulated one of the most revolutionary notions in psycho-analytical theory, namely, that the pair of opposites, ego and id, is not identical with the pair, conscious and unconscious, and that a part of the ego itself is unconscious. In *Inhibitions, Symptoms and Anxiety* he repudiated a demonological theory of mental life, according to which our life is the passive instrument of obscure forces within us, a theory which seems to have arisen as a kind of antithesis to Adler's theory of the omnipotence of the ego. Freud recommended that in every analytical investigation the part played by both the ego-element and the id-element in the given phenomenon should invariably be examined. In the same work he gave to the notion of defence the value of a general concept, under the heading of which he included, as specific forms of defence, repression and other mechanisms (two such newly discovered forms, isolation and undoing, were described in this book for the first time), and so the various forms of defence became a subject for further enquiry. These suggestions have borne fruit in more fields than one. It may be that the idea of the analysis of resistance and of character has been somewhat one-sidedly pursued; it has been discussed repeatedly of late years. But, apart from this, a large number of writings testify to the growing interest in ego-psychology. The most recent conclusions on the subject are to be found in the work by Anna Freud, to which I have referred more than once.

We have long been familiar with the fact that neurosis is a process comparable to the processes of organic disease. A conflict may, for

named by him are faulty repression, displacement, reaction-formation, projection and introjection. There are doubtless, he says, others to be considered *but we know little about them.*

instance, give rise to anxiety. To defend itself against this the ego has recourse to defence-mechanisms, and these in their turn produce undesirable results. Joan Riviere describes as already extraordinarily complicated the processes which she assumes to take place during the first year of life. Ultimately it always comes to this: the individual attempts to solve the conflicts in ways that prove useless and lead to fresh conflicts. The ego engages in a process of elaboration, the products of which in their turn evoke defensive measures on its part. When we consider the multiplicity of changes which take place in the instinctual life and in the external world, we realize that here is indeed a complicated process and that our knowledge of its various phases is still far from exact. What we encounter as neurosis in an adult or an older child is the provisional end-product of such a process, in the course of which the pathogenic conflict has been many times overlaid by later ego-elaborations. In analysis this process has to be reversed.⁶⁰ The idea that analysis must proceed from stratum to stratum, penetrating gradually from the most recent to those furthest back, is an established principle of analysis. But sometimes it has been wrongly taken to mean that the material which emerges in analysis always belongs to one particular stratum—obviously a misconception. What is really meant is that the neurosis (or the character which we are analysing) undergoes metamorphosis, as a result of analysis, into successively older forms, the whole process of its development being recapitulated in the reverse direction. Now, since the neurosis itself represents a very late phase in the process, all the ego-elaborations must be analytically studied and resolved, and this means that the neurosis gradually resumes its earlier guises, until finally we reach the old pathogenic conflict. It follows that analysis has to deal with the whole course of the neurotic process, immensely long though it be, and with all the ego's modes of elaboration in their higher and very highest forms. This is really simply a consequence of the fact that neurosis is not a linear phenomenon but a developmental process.

But this touches on the relation of the deeper strata of the unconscious to the ego and the strata nearer to the ego. The study of these higher strata is an indispensable part of analysis. The analysts whose

⁶⁰ In this and what immediately follows I am making use of Anna Freud's account of the matter. A similar account is contained in Bibring's contribution to the Symposium held at the Fourteenth International Psycho-Analytical Congress, Marienbad, 1936 (this JOURNAL, Vol. XVIII, 1937).

work we have been considering sometimes try to make immediate contact with a lower stratum. Perhaps this is more evident in the analysis of children than in that of adults. We know that Melanie Klein holds that one can make direct contact with a child's unconscious, that so-called 'deep interpretations' can be given at once and that it is actually through these that the child comes into touch with the analyst. But other analysts would from their point of view regard an attempt of this sort as a leap.

It is certainly possible to contend that a child lives more closely to the unconscious contents of the id than an adult, though even here there is much that is highly problematical. At all events we may reasonably expect that in children the neurotic process will be in an earlier stage than in adults. That is one reason why we feel more hopeful in analysing children. But even in a child a process of modification has already taken place; the rapidity with which such modifications take place is often very great. And therefore many analysts are inclined to think that, even in analysing children, it is not wise to take leaps and that, in their case too, all the complicated ego-modifications must be brought to light and studied as extensively as possible.

Now in Melanie Klein's writings *some* modes of ego-modification are discussed in great detail, notably those of introjection and projection. But there are others which need to be studied as well, 'higher' and more complicated methods adopted by the psyche in response to its instincts, anxieties and affects.

Further, attention has often been drawn to the fact that that which is arrived at by a leap, even though true, has not the value of reality to the subject. We know from the analysis of adults that there are shadows of the past, which have become shadowy as the result of later elaboration by the ego. If they are exhibited to the patient, he may perhaps understand them intellectually but he does not experience them affectively. Only when the process of elaboration has been resolved do they regain their vividness.

So far, we have considered the objections to the overleaping of the higher strata of the ego from the point of view of therapeutic technique. But I think that, without a most exact study of the higher ego-processes, the *correctness* of the conclusions drawn in this way about the deeper unconscious is questionable. We have an enormous variety of phenomena in the final products—the whole multiplicity of life. On the other hand, we have a relatively small number of

unconscious themes. Thus, a great multiplicity of elements is brought into conjunction with a comparatively small quantity. The gap between the two is filled precisely by the ego's manifold attempts at solving its conflicts. In order correctly to discover the unconscious motives we must conduct a phenomenological examination of the finished products with quite peculiar exactness and minuteness. This involves the exact study of those aspects of a given phenomenon which we conceive of as representing the methods by which, at this particular moment, the ego is seeking to solve its difficulties. Comparatively small differences in the phenomenology of a manifestation may lead one to look in quite a different direction for the originating conflict. We can think of instances of how slight differences in the description of a present-day situation may lead to other unconscious themes if we make a direct attempt to reach and effect contact with the unconscious without examining the whole process in detail.⁶¹

The conclusion seems to be that it is essential in analysis to go beyond such processes as introjection and projection or displacement and repression and to study all the methods of modification which the ego has in its arsenal and the number of which multiplies rapidly as the individual grows older. The thorough examination of the deeper strata of the unconscious remains, as it has always been, one of the desiderata of analysis, whether in the treatment of individual patients or in analytical theory in general. But without the study of the ego, including those strata in it which are conscious or near to consciousness,

⁶¹ Bibring speaks of 'singling out' a patient's present patterns of behaviour and arriving, by way of a large number of intermediate patterns, at the original infantile pattern. The present pattern embodies the instinctual impulses and anxieties now operative, as well as the ego's present methods of elaboration (some of which are stereotyped responses to impulses and anxieties which have ceased to exist). Only by means of the most careful phenomenology and by taking into consideration all the ego-mechanisms now operative can the present pattern of behaviour be properly isolated out. If this is done imperfectly—possibly through neglect of the exact study of the higher ego-elaborations—or if all the earlier patterns are not equally clearly isolated, there is a danger that we shall never arrive at a correct knowledge of the infantile pattern and the result may well be an inexact interpretation of infantile material. The consequences of such inexact interpretation have been indicated by Edward Glover, 'The Therapeutic Effect of Inexact Interpretation', this JOURNAL, Vol. XII, 1931.)

our therapeutic technique is suspect and the unconscious phantasies whose existence we infer in this way labour under one more uncertainty.

SUMMARY

In what has been said we have purposely avoided entering into controversy about any particular points in the theories under consideration and have contented ourselves with suggesting a number of problems which radiate from these theories and the study of which we hope may lead to a deeper discussion of the subject. I should like, however, to mention certain general impressions—which are, of course, subject to revision.

Melanie Klein and her colleagues have described a number of phantasies (in particular, oral phantasies) which we meet with in the analyses of adults and of older children. In doing so they have followed out a line of thought which has always been included in the sphere of analysis and which was embodied especially in Abraham's writings. We welcome the addition to our knowledge which this line of investigation promises. And we would express our gratitude to Melanie Klein for her promptitude in grasping and working out one of the difficult notions outlined by Freud in *The Ego and the Id*, which has now become the common property of analysis—the fact, namely, that the aggression of the super-ego is not merely acquired from the object but represents also the subject's own aggressiveness turned in upon himself.

But what follows gives us pause. We hesitate to believe that the only effect of reality is to confirm or to refute irrational anxieties; that the phantasies of mankind follow a predestined course and are merely rendered more or less intense by the action of reality, being always to some extent operative; that violent manifestations of aggressiveness during the first year of life are universal; that in infancy there are mechanisms at work resembling those of psychosis, so that psychotic disease in later life can be explained as the effect of modes of reaction which are part of normal development; that the phantasies in question date from a very early period (we should be inclined to place them later, in the third or fourth year of life, though we should admit that they are determined by fixations in the first two years); in fact, we doubt whether we have sufficient clues to enable us to infer the experiences of earliest infancy with that degree

of certainty which we commonly look for or whether we can claim any degree of scientific accuracy for detailed conclusions about them. Finally, we cannot but feel that an excursion has been made into the shadowy past, while much that could be more satisfactorily proved and that is indispensable for analysis has been left unregarded.

Anyone who is interested in the elucidation of these problems is bound to test all the points here enumerated upon the largest possible body of material. The constant reiteration of assertion and counter-assertion, based on alleged individual experience, is not likely to be very fruitful.

Psycho-analysis has a dialectical structure. The poles of its dialectic are phantasy and reality, biology and social environment, constitution and experience, unconscious and conscious, transference and real relationships, the id and the ego. The works which I have discussed in this paper incline very markedly to the one extreme, while the majority of analysts, following in the footsteps of Freud, hold a middle course.

ABSTRACTS

GENERAL

S. H. Fuchs. 'Zum Stand der heutigen Biologie. Dargestellt an Kurt Goldstein: "Der Aufbau des Organismus".' *Imago*, 1936, Band XXII, Heft 2, S. 210-241.

In widely different fields of modern science, such as Medicine, Psychology, Philosophy, Sociology and Anthropology, a change has taken place in much the same direction.

The work of Goldstein is chosen in this article in order to shew the essentials of this view in one of its best representations. In general terms the essence of this 'Ganzheitsauffassung' is the realization that no biological phenomenon can be understood or even described in isolation. It has to be taken in connection with the whole condition of the organism (society), present and past, with the whole sphere to which it belongs, in short, with the 'whole situation'. The idea that an organism could be thought to be built up from isolated parts or that the function of the nervous system could be explained on the assumption of reflexes as elementary facts and many other ideas still tacitly accepted as axiomatic are proved to be incorrect. It is shewn that what strikes us as 'facts' is dependent on what we consider to be remarkable on the ground of a preconceived idea or theory. So, for instance, a reflex turns out to be not an element on which the nervous system is built up, but an 'answer' to a stimulus in a highly differentiated state of development of the whole N.S. The same is true for an 'association'. Any living being can at any time only be understood as a whole, and the world in which it lives is inseparable from its own constitution and condition. There is abundant proof for the slogan: the whole is earlier than the part. If this is true it must be of high interest to the analyst and influence our theoretical conceptions considerably. The author shews that by the example of 'condensation,' and claims that we must think in terms of differentiation as well as assume an 'analytic function of the ego' besides the synthetic one. But he shews also that in actual fact analysis respects and always has respected these criteria. It cannot therefore be set aside only because it expresses its findings in a terminology and theory whose underlying philosophical assumptions can no longer be wholly upheld.

Author's Abstract.

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E. Bibring. 'Zur Entwicklung und Problematik der Triebtheorie.' *Imago*, 1936, Bd. XXII, Heft 2, S. 147.

The paper is divided into four paragraphs in accordance with the

four stages of development of the theory of impulses. (1) In the first stage two groups of impulses, i.e. sexual and ego-impulses, were postulated. Sexual instincts were thoroughly investigated while ego-impulses remained, at first, relatively unknown. (2) In the second stage the concept of narcissism was introduced into the libido-theory, which resulted in the discovery of the libidinal parts of ego-impulses. Freud, however, maintained that, apart from the libidinal part, there was another original, non-libidinal one, which he simply called 'interest' in the sense of a non-libidinal egotism. (3) The third stage, which has frequently been overlooked, attributed aggressive tendencies to ego-impulses as an essential factor. (4) The fourth stage has its origin in the progressing knowledge of the structure of the whole psychic apparatus: its division into various layers, the id as a vital layer, the ego as the organized part of the id, and particularly the super-ego as the unconscious part of the ego. This view does not regard aggressive tendencies as original parts of ego-impulses, but considers them as independent impulses of aggression or destruction and locates them with the sexual impulses in the vital layer. Ego-impulses lose their independent character and are taken as derivatives partly of the libidinal and partly of the aggressive impulses.

H. A. Thorner.

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Lilian Rotter-Kertesz. 'Der tiefenpsychologische Hintergrund der inzestuösen Fixierung.' *Internationale Zeitschrift für Psychoanalyse*, 1936, Band XXII, S. 338-348.

In trying to gain new light on the woman's object-choice, Dr. Rotter-Kertesz came across much suggestive material connected with the female castration complex and incestuous fixation to the mother, which substantiated Hoffmann's and Hermann's views on early 'dual-unity'. This, with Hermann, the author regards as not oral only, and finds that its disruption, resulting in separation anxiety, is the cause of the phantasy that to be alone is not to be a whole, but to be in pieces, mutilated, castrated.

N. Searl.

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Imre Hermann. 'Sich-Anklammern—Auf-Suche-Gehen.' Über ein in der Psychoanalyse bisher vernachlässigtes Triebgegensatzpaar und sein Verhältnis zum Sadismus-Masochismus. *Internationale Zeitschrift für Psychoanalyse*, 1936, Band XXII, S. 349-370.

In this paper Dr. Hermann gathers together the material of twelve years' special attention to the desire to cling to the mother's body, and seeks to give it its place as an instinct (together with its antithesis, searching) in the structure of psychoanalytical theory.

He takes as starting-points (1) the erogeneity of the hand and its connection with erection in an adult patient and (2) the relation between the mother and the suckling in the apes. As to the former, observation shewed the phenomenon of extreme finger tension during suckling as well as during obsessive sucking in older children; and the author points out that the instinctual drive of the infant ape to cling to the mother's fur during the first months persists in its later sleeping position and the important 'grooming' game. On these two factual groups Dr. Hermann bases the hypothesis of phylogenetic traumatic interference with the human instinctual urge to cling to the mother, or series of interferences, and illustrates his point by the mention of children who could not sleep alone without getting hold of something to suck or without having the hand held. (The typical sleeping position of the suckling he connects with this desire to cling rather than with the continuation of inter-uterine life, from which it differs in some ways.) Dr. Hermann accordingly devotes attention to the new-born infant's power of seizing and holding on (*Greiftrieb*) connecting it with the 'clinging-instinct', and thus providing it with a primary instinctual object—the mother. He attributes its comparative disappearance after the first three weeks to its atrophy through unnatural lack of opportunity; and finds neurological support for his views. Dr. Hermann next explains the fact that approximately the same finger and arm movements can be found in the infant in pleasure and in anxiety by the desire in both cases to gain more from the mother, more pleasure or more care; and regards castration anxiety as due in the first place to the loss of the object, and secondarily to the loss of the genital as the substitute for the object. Case material illustrates not only the foregoing but also the alternatives arising from the same source, of a striving after separation and a continual search for an object to which to cling, with an indication of the importance of hair and scaly skin and of the hand in this connection.

The roaming impulse Dr. Hermann thus sees as a combination of the above alternatives. He establishes as an instinct the impulse to cling through its possession of the four following characteristics, in addition to its active, not reactive, character: (1) general applicability to the species, (2) a biologically determined type of object, (3) an aim, and (4) a 'whirl-pool' type of activity, the strength of attraction in its different levels increasing in proportion to the nearness to the central force. Thus clinging and searching are regarded as partial libidinal instincts; the searching instinct, although of independent origin, acts as guide to the sexual instinct; while the libidinal clinging instinct is supported by its correspondences with self-preservative tendencies, and the drive toward separation is reactive in type.

Lastly Dr. Hermann suggests the development of sadism in general out

of a combination of frustration and regressive strengthening of the desire to cling, and the use of the hand as an instrument of mastery; and of masochism through the application of self-healing tendencies to the separation conflict (e.g. self-mutilations and the acceptance of pain as a 'lesser evil').

N. Searl.



CLINICAL

Annie Reich. 'Klinischer Beitrag zum Verständnis der paranoiden Persönlichkeit.' *Internationale Zeitschrift für Psychoanalyse*, 1936, Band XXII, S. 315-337.

A case of severe paranoia, a young man of twenty, who nevertheless retained powers of ordered intelligence and ready co-operation gave Dr. Reich the possibility of an analysis in which the regression of the ego and the libido to deepest archaic levels found direct verbal expression. This fact together with the memories of impressions, thoughts and phantasies dating from the second year obviated the need of doubtful reconstruction, and of interpretation from children's games and phantasies which the author sees as a difficulty in the child analysis of the English school. The material confirmed the work of Freud, Abraham, Tausk, Ophuijsen, Stärcke and Bibring on paranoia, a particular feature of the case being the way in which the external persecutors took on the actual form of the skybalum. The illness broke out after a dog-bite, while the patient waited with others for inoculation against rabies: the dreaded change became an immediate psychical actuality, the figures of the other patients assuming strange and threatening forms. Thenceforth, until its solution by analysis, his central symptom consisted in these crazy transformations. All libidinal excitation in relation to an object brought about the change of the object into a monster, a 'stool person', with a corresponding change in himself, to be followed by strenuous efforts to bring about and maintain an overestimation of himself and of the object equal to the previous degradation of the two. The connection of the various changes with processes of introjection and projection on an oral-anal-sadistic level was particularly clearly given in the patient's own account of the process; the introjected object being eaten and chewed, but 'making a hubbub in his body', 'threatening him inside', 'infecting him with its own defects', so that he took on its form. Freedom from this painful situation was sought by the ejection of the object, now an ugly, evil-smelling, chewed mass, seeking revenge on him, therefore to be reintroduced. The processes and results formed a vicious circle; but with intense pleasure in the passing of the faecal mass, and in the desire for reunion with the faecal persecutor connected with the father's incorporated phallus, castration

anxiety determining the regressive defence against sexual excitation. Outstanding in the very interesting case material are the facts (1) that as an external or weakened form of oral-anal coitus in the primal scene (coprophagy), the patient smeared his penis with faeces; (2) that all defective objects defeated his megalomaniac compensatory attempts, releasing an intensely sadistic desire to annihilate completely, by swallowing, the partially destroyed object; (3) that the desire for reunion with an object (by being swallowed) was only possible with a de-sexualized, that is, not sadistic or frustrating object; (4) that all abstract processes, e.g. of thought, excitement, etc., were given concrete forms and became 'things'.

In following out through the child's development the ego-id-super-ego relations in this case, Dr. Reich touches on many interesting and debatable points, paying particular attention to the archaic ego with its magical incorporations and defence mechanisms and to a distinction between the 'pseudo-super-ego,' shewn in the child's terror of a 'real', though instinct-ridden and misunderstood, 'outer world', and the 'true super-ego' arising out of the identification with a loved nurse who had forbidden his coprophagy. Thus Dr. Reich says that the normal desexualized super-ego reproduces inwardly the commands and prohibitions of authority, while the precursors of the super-ego evince anxiety of a punishing reality. Although this case shews so many correspondences in mechanisms and phantasies with the views of the English school of child analysts on the normal development of the child, Dr. Reich does not consider that they provide any confirmation, since the childhood in question was a particularly abnormal one.

N. Searl.

★

M. Brunner. 'Beeinflussung des Stotterns.' *Zeitschrift für psychoanalytischen Pädagogik*, X. J., 1936, S. 360-365.

An account of the beginning of a stutter in a two-year-old boy who had suffered a very severe and prolonged illness during bottle-feeding. His speech improved when he was given caramels to suck in imitation of an elder brother, while at the same time the child who had been 'clean' from an unusually early age also began to outdo his brother, enuretic at night, by anal and urethral incontinence, the latter lasting for some months by day.

Nina Searl.

★

Karl A. Menninger. 'Psychiatry and Medicine.' *Bulletin of the Menninger Clinic*, 1936, Vol. I, pp. 1-9.

The advent of psycho-analysis is said to have 'ended the era of thera-

peutic nihilism in psychiatry'. Great differences still separate psychiatry from general medicine, and it should be a first task of physicians to observe and evaluate emotional reactions. Suggested treatment must utilize not only physical, chemical and mechanical agencies, but psychological agencies as well. A plea is made for a more extensive application of the psychiatric approach along the lines of those recently undertaken at the Institute of Psychoanalysis in Chicago and at the Presbyterian Hospital in New York.

It is suggested that Freud's theory of a self-destructive tendency gives a point of view that will help to reconcile differences of opinion between psychiatrists and general practitioners. An extension of the theory to organic diseases has not definitely been made by Freud, but they may possibly be 'illustrations' too. The physician throws the weight of his knowledge on the side of the embattled life-instinct, and by so doing diverts his own destructive tendencies, then saving his life by losing it. The older concepts of medical science, in terms of man *versus* environment, induced 'more naïve assumptions, false optimism and easy discouragement' than Freud's hypothesis.

M. G. Evans.

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DREAMS

Thomas M. French. 'Die Realitätsprüfung im Traum.' *Imago*, 1937, Bd. XXIII, S. 157-170.

The manifest content of dreams is sometimes prophetic, in that it contains the first sign of an altered method of dealing with conflicts. This is due to the fact that sleep lessens pain (Unlust), and thus enables the patient to make tentative attempts at new adjustments. The same decrease of repression means that the manifest content of dreams provides a valuable index to the balance of strength between the repressed and repressing forces.

I. F. Grant Duff.

★

Franz Alexander and George W. Wilson. 'Quantitative Dream Studies: A Methodological Attempt at a Quantitative Evaluation of Psychoanalytic Material.' *Psychoanalytic Quarterly*, 1935, Vol. IV, No. 3, pp. 371-407.

A quantitative study was made of the dreams of eighteen patients with gastro-intestinal symptoms undergoing analysis. The dynamic content of the dreams was correlated with organic symptoms and the dreams classified according to the following types: satisfied receptive, inhibited receptive, satisfied taking, inhibited taking, satisfied giving,

inhibited giving, satisfied attacking, inhibited attacking, satisfied retaining, inhibited retaining.

The significant findings may be summarized as follows: The number of retentive dreams is relatively small in all cases. Peptic ulcer cases have intense intaking tendencies, both passive receiving and aggressive taking, marked by much conflict and frequent compensatory giving. Chronic diarrhoea sufferers shew intense intaking tendencies with more passive receiving than aggressive taking, and much compensatory giving, resembling peptic ulcer patients in their conflict about intaking. The latter compensate more by activity in actual life, the former symptomatically. The patients with constipation have the strongest retentive tendencies and an aggressive eliminating urge, with less conflict about intaking than those having peptic ulcer and diarrhoea.

This quantitative method furnishes a reliable means of estimating the intensity of dynamic tendencies when used in connection with thorough and competent analysis.

Lucile Dooley.

★

Maxim Steiner. 'Die Traumsymbolik der analytischen Situation.' *Internationale Zeitschrift für Psychoanalyse*, 1935, Bd. XXI, S. 419-430.

The short analyses which the writer has been obliged by his particular cases to carry out have given him perhaps more opportunity than many others to study certain typical dream situations. It is no new observation that patients who seldom or never dream may dream and remember their dreams after analysis begins. Nevertheless, he thinks the analytic situation as portrayed in dreams has not received sufficient attention. The interpretation of a dream can involve many problems, but the introduction of the analytic solution is a condition never to be omitted. The narcissistic position in the early phase of analysis is characterized by certain types of resistances clearly seen in dreams: defending the patient's incursions on his privacy; resistances to lying down, against having to say everything (dreams of nakedness, etc.); resistance against this 'cold method' shewn by dreams requiring the analyst to do or say something. The symbolism of numbers should never be overlooked. Among the most frequent motives is that of the degradation of the analyst. As transference occurs, the analytic situation changes, as do the dreams. Again at the end there is another flare up: the Resistance of the last phase. A number of dreams are quoted in support of the text.

M. D. Eder.

★

Eduard Hitschmann. 'Beiträge zu einer Psychopathologie des Traumes' II. *Internationale Zeitschrift für Psychoanalyse*, 1935, Bd. XXI, S. 430-444.

In continuance of the previous article on this subject (*Zeitschrift* 1935, XVI, p. 373) emphasis is laid upon the phenomenology of dreams, necessitating a description of the various types of dreams, their origin, etc. Copious references are given to the literature. It is pointed out that a timely knowledge of the symptoms referred to in a dream might put the physicians on guard against their development. The dream life of chronic alcoholism, of delirium tremens, deserves study. Characterology finds its expression in dream life and demands further study. Have Freud's 'libidinal types' any characteristic dream life? A more extensive collection is required of dreams during the course of psycho-analytic treatment and their occurrence at definite stages of treatment. An example is given of a dream related at the first session.

Although this practical consideration of dream life may seem lifeless compared with Freud's 'Dream Interpretation', the work must be undertaken. Dreams may throw light upon physiological changes. Do dreams change during and after organo-therapy or after transplantation of testicles or ovaries? The article concludes with a detailed scheme, under thirteen headings, for the psychopathology of the dream.

M. D. Eder.



SEXUALITY

Michael Bálint. 'Zur Kritik der Lehre von den prägenitalen Libido-organisationen.' *Internationale Zeitschrift für Psychoanalyse*, 1935, Bd. XXI, S. 525.

In this paper Bálint attacks the whole of that trend in modern psycho-analytic theory which is based upon the scheme put forward by Abraham in his essay on the development of the libido. He argues that difficulties, theoretical and technical, arise out of adherence to this scheme. He does not, of course, dispute the existence of the so-called oral, anal, phallic, etc., partial impulses, the clinical evidence for which is beyond dispute, but explains these as artefacts brought about by factors in the environment, particularly educational, and not as biologically grounded developmental stages. He contends that this is borne out by the fact that in practice we analyse and dissolve symptoms arising from these pregenital impulses.

He contends that we have been wrong in regarding the development of the genital function and that of object-relations as two aspects of the same process. He considers that the two processes, although much bound up with each other, are yet separate. We have confused object-relations with modes of gratification. He argues that if we accept a separate development of love and choose as a starting-point the passive object-love

first described by Ferenczi the clinical facts observed are considerably easier to explain than they are if we follow the hitherto accepted parallelism suggested by Abraham. This passive object-love, he asserts, is the primary aim of all erotic striving and the first object-relation right down to the earliest days of life. It continues throughout life and remains the final purpose of active object-love, this being the term he would prefer for what we now call genital object-relations. The evidence for this he finds not only in clinical observation but in ethnology, as well as in the usage of language, and finally in the fact that even psycho-analytic therapy tacitly bases itself upon such an assumption. On the other hand, adherence to Abraham's scheme gives rise, in his opinion, to serious discrepancy between theory and practice as well as to false premises which necessitate the continuous antedating of genital phenomena as well as of super-ego formation.

Mark Burke.

★

Hans Christoffel. 'Harntrieübäusserungen, insbesondere Enuresis, Urophilie und Uropolemie.' *Internationale Zeitschrift für Psychoanalyse*, 1935, Bd. XXI, H. 3, S. 374-388.

This paper ranges widely over the vast topic of urinary tendencies and manifestations in adults, children and animals and contains much that is interesting and suggestive.

H. Mayor.

BOOK REVIEWS

How to Psycho-Analyse Yourself. By Joseph Ralph. (Watts & Co. Ltd., London, 1937. Pp. 242. Price 7s. 6d.)

This book gives the appearance of being new, but actually it is almost identical with one of the same name which the author published in America sixteen years ago (reviewed in this JOURNAL, Vol. III, p. 232), a fact which the Publishers have omitted to mention.

In a preface Dr. Beadnell of the Admiralty warns the readers to avoid wasting their time and money on psycho-analysts and speaks feelingly of the harm they do, of 'neurotics made worse by the treatment, and of young people contaminated by the unseemly sexual suggestions of ill-balanced, fanatical followers of Freud.'

The book itself shews no knowledge of psycho-analysis, being a characteristic exploitation of the word itself. It does not actually emanate from Hollywood, but from a town in the same State. It consists essentially of exaltations and 'uplift' conveyed in particularly racy language. Such books do obvious harm in misleading neurotics about the significance of their symptoms and the opportunity of curing them.

E. J.

★

Modern Discoveries in Medical Psychology. By Clifford Allen. (Macmillan & Co. Ltd., London, 1937. Pp. 280. Price 8s. 6d.)

The aim of this book is stated to be an impartial presentation of the work of eight psycho-pathologists: Mesmer, Janet, Morton Prince, Freud, Adler, Jung, Kretschmer, and Pavlov. In it the author has to a very large extent succeeded. His book is interestingly written and his attitude is one of aimable respect towards all the workers in question. The chief defect of the book is that it is too popular; it is a *bright* presentation rather than a closely reasoned scientific account. The description of the free association method is specially meagre. The book could also have done with an index.

A number of comments may be added on relatively unimportant points. Professor Bleuler's name is consistently endowed with a diæresis to which it lays no claim. The author makes merry in a monotonous fashion over fancied resemblances between Mesmer and Freud. Both were students in Vienna! (Perhaps both had dark eyes.) (Mesmer) 'rapidly became the centre of attention in Vienna. Somewhat in the same way as about twenty-three years ago society ladies became interested in psycho-analysis and went about talking of their complexes, so the Viennese ladies wore "magnetized clothes" and ate their soup from "magnetized soup plates".' We have several times come across vague illusions to

this supposed craze of society women for psycho-analysis, but have never seen it placed in time so precisely. Unfortunately the author does not locate it in space so definitely as in time. Viennese society had certainly other things with which to occupy itself in 1914, at the beginning of the war, and London had hardly heard of the subject at that time. We are told once more that Charcot drew Freud's attention to the study of hypnotism and hysteria (pp. 18, 19), the fact being overlooked that Freud was familiar with both through his association with Breuer before he went to Paris. The author states that Freud made his study on dreams before parting from Breuer. One wonders where he learned this and rather doubts the accuracy of it. It is a pity that the author perpetuates the old mistake of attributing to Freud the phrase 'Dream Censor' instead of the one he uses, 'Censorship'. Freud did not transfer his 'Presidency of the Psycho-Analytical Society' (i.e. the International Psycho-Analytical Association) to Jung, who was the first President of it. No one familiar with Jung's later publications, particularly in German circles, would say that, unlike Adler, 'he has refrained from giving sly stabs to Freud'. The author is inclined to doubt the story that Freud made his study of Totemism as a revenge on Jung, a doubt he might have fortified by citing the fact that Freud made it before the break with Jung.

The author is highly appreciative of most of the pathologists whose work he is presenting, least so with Jung. He writes, for instance, about psycho-analysis: 'exploratory treatment is the only radical cure of neurosis, and brilliant results can be obtained by its use. It literally creates a new personality. When it succeeds it is incomparable. Hypnosis or any other method of treatment for neurotic patients is merely dabbling with the problem in comparison with analytical psychotherapy.' On the contrary: 'One cannot, however, admit that Jung has brought anything new to the therapy. He has rather spoiled the beautiful scientific technique of Freud, which it is difficult for those who are not psychotherapists to appreciate, by the addition of a hotch-potch of religion and mythology which cannot act in any other manner than as suggestion. Inasmuch as he does this, he abandons Freud's discoveries and regresses to the days of Mesmer.'

✱

E. J.

Primitives and the Supernatural. By Lucien Lévy-Bruhl. (George Allen & Unwin Ltd., London, 1936. Pp. 405. Price 18s.)

This prolific writer whose characteristic views on primitive man are well known has now contributed what is in effect a postscript to his book on *The Soul of the Primitive*. Nearly all the book is taken up with an extraordinarily interesting and valuable collection of individual data and

there is very little in the way of resulting generalization. The author's conclusion about the attitude of primitives to the supernatural essentially is that it consists of what Freud has termed 'free floating anxiety.' This becomes attached to all manner of ideas and objects, souls of the dead, an inchoate hierarchy of supernatural beings or powers, and so on, and the author insists that it is primarily independent of a specific content. To psycho-analysts this is as much as to say that the true object of the danger generating apprehensiveness is situate in the unconscious mind, but the author has apparently no knowledge of such conceptions.

The author correlates very closely the ideas of witchcraft and incest, as the present reviewer has done in another connection, and considers that the horror of incest is that such acts can only be committed by some one bewitched by a malign power. He points out therefore that the extirpation of such offenders against the social code is, strictly speaking, not so much the punishment as a protective measure designed to remove a source of danger. Incidentally, it is interesting to note that in New Guinea the same word 'knou' is used for both incest and endogamic cannibalism; in other words, coitus with a member of the family is equated with eating that person. It is evident that the main value of the book resides in its collection and co-ordination of important psychological material which will no doubt prove useful to those adopting a more interpretative and dynamic attitude towards such data.

E. J.

★

The Single Woman. By R. L. Dickinson and L. Beam. (Williams & Norgate Ltd., and Baillière, Tindall and Cox, London. Pp. 469. Price 21s.)

This book is the second of a trilogy dealing with sexual experience in women. It is in the main a compendium of case records drawn from Dr. Dickinson's lengthy practice as a gynæcologist, classified and presented by Miss Beam who has specialized in applied psychology and education. The arrangement of the material is made on a basis of types of sexual experience and interest.

For the psychologist this study is of very limited value. Collected, from the psychologist's point of view, by an untrained observer, the data is very haphazard and will hardly help either to develop old or stimulate new theoretical work. But what it lacks in depth, it perhaps makes up in numbers, for we have here records of such a mass of cases as, through the very nature of his work, no psychologist could collect. This fact gives the book a utility as a check and a source of corroborative evidence. With its two companion volumes it can do something towards supplying that quantitative aspect which psychological research tends to lack.

S. L. Yates.

★

The Children's Play Centre. By D. E. M. Gardiner. (Methuen, London, 1937. Pp. xiii + 143. Price 3s. 6d.)

This little book contains an account of a very interesting experiment in a training college for elementary school teachers. A play centre was opened in 1931, and the children from a poor neighbouring district were invited to join it.

The book records the development of the experiment, the difficulties encountered, and how they were surmounted. A number of different group play activities are described in some detail.

The value of the play centre to the individual children is made very clear, and it will occasion no surprise to those familiar with child guidance work. But, as Dr. Susan Isaacs says in her foreword: 'The major contribution of Miss Gardiner's experiment, however, is to the technique of training students. The play centre solves many of the chief difficulties in the teaching of psychology and educational method to young students.'

Although the students cannot in this way gain insight into the deeper problems of the mind, Miss Gardiner has hit on a very happy way of letting them find out by their own observation that their future charges are not just educational problems, but are real human beings with an active life of emotion and phantasy.

W. Hewitt Gillespie.

BULLETIN OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

EDITED BY
EDWARD GLOVER, GENERAL SECRETARY

I. CLINICAL ESSAY PRIZE

Members and Associate Members of the International Psycho-Analytical Association are reminded that competitors for the Clinical Essay Prize must send in their work to the Hon. Secretary of the Institute of Psycho-Analysis, London, by March 31, 1938.

The conditions governing the competition are recorded in Vol. XVII, Part 1, p. 139 of the INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS.

S. M. Payne,
(*Hon. Secretary*).

II. DAVID EDER MEMORIAL

Following on the decision to establish a Memorial Library in the Hebrew University, Jerusalem, Dr. Jones launched an appeal for funds amongst members of the International Psycho-Analytical Association. Simultaneously a wider appeal was made in Zionist and other circles in which Dr. Eder had played a prominent part. The sum raised from the International Psycho-Analytical Association amounted to £165. This was then added to the amount derived from the general appeal, and a total of just over £600 was put at the disposal of the University.

Professor Weil desires to express his grateful acknowledgment of this contribution, and steps are being taken to expend the sum in equipping the Library. Already a nucleus has been formed from Dr. Eder's own library, and this, together with the purchases made subsequently, will ensure that psycho-analytical science is adequately represented in the Library.

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